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ABSTRACT

This study reviewed 1137 students' records from 25 school districts to determine if there is a possible conflict between Wisconsin's learning disabilities (LD) eligibility criteria and the federal definition under the Individuals with Disabilities Education Act. It also surveyed student evaluation and placement teams concerning their application of the criteria. Wisconsin requires an individual to have normal intellectual functioning and academic discrepancies in two or more achievement areas. A literature review examined: prevalence, referral, and eligibility; IQ scores and discrepancy models; and prevalence of ethnic groups in special education. Results suggest that although some students in Wisconsin may be denied eligibility for learning disabilities when using Wisconsin's criteria inflexibly, others demonstrating the same conditions may be found eligible when the criteria are applied flexibly. It was found that the eligibility decision was based on two points: the extent to which a child has demonstrated inability for success in regular education, and the extent to which further modifications cannot be anticipated in the regular education setting without assistance from special education. Recommendations for improvements in Wisconsin's identification procedures and services for students with learning disabilities were proposed by parents, administrators, and other school personnel. Twenty appendices provide letters, questionnaires, statistical analyses, and responses to a survey. (Contains 54 references.) (CR)

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A Study of Wisconsin's Application of State and Federal
LD Eligibility Criteria

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Abstract

The Office of Special Education Programs (OSEP) has contended that Wisconsin's requirements of normal intellectual functioning and academic discrepancies in two or more achievement areas, upon initial evaluation for learning disabilities (LD), are inconsistent with the Individuals with Disabilities Education Act (Part B). Wisconsin has contended that this is not the case, because Wisconsin's criteria are flexible enough to allow for identification of students who would be eligible under federal regulations. To resolve the conflict, this study was done.

Four research questions were determined, with primary interest being focused on whether Wisconsin's procedures exclude children from LD, based solely upon IQ scores less than 90 or upon the existence of a single area of significant academic discrepancy. Research questions also addressed the manner in which need for special education is determined. Finally, researchers were charged to request from parents, and other concerned individuals, recommendations for improvements in Wisconsin's identification procedures and services for learning disabled children.

A random sample of 25 school districts was drawn. Additionally, assigned samples comprised of five multiple complaint districts and of parent-nominated students were identified. A total of 1137 records for students within these sample groups was examined. Data from the records which was relevant to the research issues was entered onto profile sheets and into a computer database. Data was analyzed in terms of the key research questions, and in terms of other issues related to the key research questions, which become apparent upon record review. Specifically, researchers determined the extent to which M-teams in Wisconsin apply eligibility criteria either flexibly or inflexibly, when considering IQ and academic discrepancy issues. The extent to which students may be denied services due to having all IQ scores below 90, due to having only a single area of academic discrepancy, or due to a combination of these two factors, was analyzed. The extent to which M-teams in Wisconsin may also apply these criteria flexibly, thereby finding students eligible for LD services despite the existence of these conditions, was also analyzed. Results show that, although some students in Wisconsin may be denied LD eligibility on

these bases, others demonstrating the same condition(s) may be found eligible for LD services, when flexible application occurs.

Regarding the manner in which M-teams determine a child's need for special education services, results show that consideration is given essentially to two points. These are: the extent to which a child has already demonstrated inability to achieve success in regular education, in spite of previous modifications of methods and curriculum; and the extent to which M-teams believe that further modifications essential for success cannot reasonably be anticipated in the regular education setting, without assistance from special education.

Recommendations for improvements in Wisconsin's identification procedures and services relative to students with learning disabilities were proposed by parents, administrators, and other school personnel.

INTRODUCTION

For approximately 18 years, elements of Wisconsin's learning disabilities eligibility criteria have been contested by the Federal Department of Education. Although changes have occurred in both the federal and state eligibility criteria over that time, and agreement has generally been reached, two areas of dispute continue to exist (see Thomas Hehir letter to Dr. Juanita Pawlisch, November 18, 1994, Appendix A).

Problem

The continuing areas of dispute are: Wisconsin's criteria require that eligibility for learning disabilities placement be predicated upon the student having, (1) normal intellectual functioning or potential for normal functioning, and (2) a significant discrepancy between expected and functional achievement in two or more areas of the readiness or basic skill areas of math, reading, spelling, and written language. The federal criteria require no minimum intellectual functioning level, and they require only one area of significant discrepancy between expected achievement and functional achievement. The position of the United States Office of Special Education Programs (OSEP) is that Wisconsin's differences in criteria, in effect, deny consideration for and placement in learning disabilities (LD) programs to students who would be eligible under federal guidelines. Wisconsin counters this position by stating that, although its criteria are apparently different from those of the federal government, in practice their criteria identify as eligible for LD services the same population of students as would be identified under the federal criteria. For example, Wisconsin contends that its criterion of two areas of significant discrepancy, in practice, equates to the federal government's criterion of one area of significant discrepancy, because only rarely does a single area of language disability stand alone, e.g., if a student has a reading disability, it is probable that he/she will also have a spelling or a written language discrepancy, etc. As for normal intellectual functioning, Wisconsin contends that schools within the state are allowed considerable flexibility when determining normal functioning or potential for normal functioning.

i.e., that IQ scores may be used to make the determination but rules permit, and even invite, consideration of other relevant factors.

As a result of this disagreement and alleged restrictions of rightful services, in July 1995 the United States Department of Education threatened to withhold approximately $50 million of federal special education funding from the state of Wisconsin.

Disputed Issues

The Office of Special Education Programs (OSEP) has contended that Wisconsin's rules are inconsistent with the Individuals with Disabilities Act (Part B). Wisconsin's Department of Public Instruction (DPI) has responded that, although language in its rules differs from that in the federal regulations, the Wisconsin rules are flexible enough so that Wisconsin M-teams have the latitude to identify the same students as would be found eligible for LD services under federal regulations: OSEP and DPI agreed that independent researchers would collect data and make recommendations to resolve this dispute.

Contentions of Office of Special Education Program (OSEP)

Specifically, as documented in a letter to Dr. Juanita Pawlisch dated November 18, 1994, (See Appendix A) OSEP contends that Wisconsin requirements of normal intellectual functioning or potential for normal functioning, and the existence of significant discrepancies in two or more achievement areas, are inconsistent with the Individuals with Disabilities Education Act (Part B) in that:

1. "The Federal definition is specific in its requirement that only one or more of the areas, including oral expression, listening comprehension, basic reading skill, reading comprehension, mathematics calculating, or mathematical reasoning, need be severely discrepant in order to identify a child as having a learning disability."

2. "Although Wisconsin's Code permits consideration of eligibility as a child with mental retardation, on a selective basis, for a child with scores between -1 and -2 S.D., the code does not appear to permit consideration for eligibility as a child with a learning disability for a child who

scores within this range. Thus, adherence to Wisconsin's Code effectively results in a group of children, whose learning problems are not the result of mental retardation, not being eligible for consideration as learning disabled because of their failure to achieve a score above -1 S.D."

This same letter, reflecting a parent complaint to OSEP, also challenged Wisconsin's 50% criterion for significant discrepancy. However, after reviewing Wisconsin's rationale for this criterion, OSEP stated:

> Based on the above, [rationale provided] we conclude that the requirement of a discrepancy at or below 50% does not violate the provisions of Part B in that adherence to the requirement does not deny services to students with learning disabilities (p. 3).

Response from Wisconsin Department of Public Instruction (DPI)

In response to these contentions, DPI has contended that its criteria for identification of LD are flexible and do not arbitrarily exclude students from consideration for LD services. Specifically, Wisconsin's official response to the issues raised by OSEP have: consistently denied that the state's criteria deny services to students eligible under federal criteria, cited approximately 20 years of past approval of its criteria by OSEP, expressed concern that changing criteria would result in false positives, and refuted OSEP's specific allegations on an item by item basis (See Appendix B). Responses also contend that OSEP has misinterpreted or misunderstood the intent and effect of Wisconsin's eligibility rules. In essence, DPI has contended that, although its eligibility rules are stated differently than the federal government's eligibility rules, students eligible for placement under federal rules are not excluded from LD placement by Wisconsin eligibility criteria.

In a letter to Mr. Thomas Hehir dated January 20, 1995 (See Appendix B), Dr. Juanita Pawlisch responds to OSEP's primary concern, the normal intellectual functioning issue, in the following manner:

> As discussed below, we believe that OSEP's finding regarding this particular point reflects an obvious misunderstanding of Wisconsin's rule. We believe that OSEP's finding is inconsistent with the plain language of the rule as written. We further believe that OSEP's finding is inconsistent with the actual application of the rule by Wisconsin's professionals in the field (p. 1).

Speaking to OSEP's allegation that children who fail to achieve an IQ score above -1 SD are not eligible for consideration as learning disabled, Pawlisch responds:

> This erroneous finding is not supported by the rule as written or as applied in the field. A correct reading of this rule, as well as a review of application of the rule, shows that a child who achieves a score between -1 and -2 SD may be considered for eligibility as a child with a learning disability or as a child with CD. Rather than effectively excluding a group of children from consideration as LD, Wisconsin's rule recognizes an overlapping area of potential eligibility and permits a finding of LD or CD on an individualized basis (p. 2).

In another letter, dated September 29, 1992 (See Appendix C), in response to Mr. Ken Miska's complaint against the DPI, Dr. Juanita Pawlisch addressed the issue of one single area of significant discrepancy as follows:

> The federal rules indicate that a severe discrepancy in a single area of achievement may be used to determine that a child has a specific learning disability...Wisconsin's rules specify that a significant discrepancy must exist in two or more areas. However, since a significant discrepancy in reading or written expression rarely exists without a significant

> discrepancy in spelling, the requirement of a discrepancy in two or more areas such as reading and spelling or written language and spelling, is, in effect comparable to the federal suggestion of a severe discrepancy in a single area of achievement. The current Wisconsin rules allow for a significant discrepancy in the single area of math. The requirement for a significant discrepancy in two or more areas, with the exception of math, is therefore considered to be currently compatible with the federal criteria....(pp. 4-5).

Resolution of Problem

To resolve the dispute, OSEP and DPI agreed to employ independent researchers to collect data and, by February 28, 1996 (since extended to March 31, 1996), to make recommendations for resolution of the two major areas of contention. In addition to resolution of major issues, the DPI desired, as a result of this research, information that would assist them to better educate schools about current practices in LD consideration and placement, and recommendations for improvement of current practices.

Specifically, in a letter from Dr. Pawlisch to OSEP dated July 20, 1995 (See Appendix D), Dr. Pawlisch proposed an investigation of a sample of Wisconsin school districts to determine if they "are interpreting and applying Wisconsin's eligibility criteria for children with specific disabilities in a manner that is fully consistent with Part B eligibility criteria set forth in 34 CFR ss 300.7 and 300.541." Furthermore, Dr. Pawlisch assured:

> If the results of the monitoring indicate a pattern of noncompliance with the requirements of 300.541, DPI assures that it will take -- no later than July 1, 1996 -- all steps necessary to ensure compliance with this provision, including, if appropriate, technical assistance and revision of the Wisconsin regulations (p. 1).

To investigate this issue, the researchers reviewed M-team reports taken from a random sample of Wisconsin school districts, and other designated school districts, to infer eligibility practices commonly used throughout the state. It was the researchers' intent to describe practices that are employed by the school districts and, if possible, to answer questions about the extent to which problematic arbitrary eligibility decisions are prevalent within the school districts in the study and the state. It was assumed that the results of the study could reflect the following range of outcomes:

a. Wisconsin M-teams make eligibility determinations consistent with Part B eligibility criteria.

b. Wisconsin M-teams violate Part B eligibility criteria and the violations are statewide in nature.

c. Wisconsin M-teams violate Part B eligibility criteria but the violations are not statewide; rather they are idiosyncratic to certain school systems or certain students within school systems.

Thus, the task for the researchers was to determine if violations exist and, if they do, to present comprehensive information indicating whether the violations are statewide, or whether they are idiosyncratic to school systems or even to individual students within school systems.

The charge to the researchers is as follows: (See Appendix E)

Responsibilities of the investigators will include:

* Participate in designing the study

* Develop protocols and other materials used in the study

* Develop proposed standards and procedures to be used to collect and analyze data

* Mail and score protocols

* Conduct interviews

* Summarize data and prepare progress reports on the study

* Schedule steering committee meetings in conjunction with the committee chairperson

* Present data and progress reports to the steering committee by January 31, 1996

* Write up and present to the steering committee the final findings of the study

* Submit a report of the findings of the study to DPI and OSEP by February 28, 1996 (since changed to March 31, 1996)

* Meet with DPI and OSEP about the study findings and implications and the recommendations of the investigators

* Receive recommendations from the steering committee and synthesize findings and recommendations of the committee into a final study report

* Work with DPI to formulate and present appropriate follow up activities (pp. 3-4).

Research Questions

The OSEP and DPI agreed upon four general research questions to be answered by the researchers (See Appendix E). These are:

1. When evaluating children for learning disabilities eligibility, do multidisciplinary-teams (M-teams) exclude children from consideration solely based upon intellectual functioning? If so, what are the intellectual functioning criteria and to what extent is there flexibility in the application of those criteria?

2. After M-teams determine that children meet criteria for the handicapping condition of learning disabilities, how do they determine whether the child needs special education?

3. When evaluating children for learning disabilities, how do M-teams determine the areas in which there must be a severe discrepancy?

4. Do parents, teachers, and administrators have suggestions for ways in which Wisconsin LD criteria and identification procedures can be improved? If so, what are their suggestions?

Steering Committee

A steering committee consisting of representatives from parent groups, DPI, school teachers, school administrators, and school boards was consulted and informed monthly about procedures, results and related issues. Approximately one month prior to writing of the final report, a preliminary report was submitted to the steering committee for inspection and for suggested changes. For identification of steering committee members, see Appendix F.

REVIEW OF LITERATURE

Issues related to the identification of LD have long existed in the literature, and continue as issues of contention among researchers, professionals, and practitioners today. Questions regarding IQ tests and their validity as measures of intellectual functioning, or as predictors of academic achievement, have existed since these tests were developed. Similarly, the concept of discrepancy, clearly related to the concept of IQ, has been attacked, with some professionals questioning the validity of the concept and others questioning how a discrepancy which identifies LD students may best be determined. The relative importance of formal test results versus the role of professional judgment, in the identification of LD, has long constituted a third area of disagreement. Finally, the concern regarding overidentification and/or misidentification of LD students has always existed; and this concern has become more apparent as controversy has increased regarding appropriate allocation of resources for all educational programs.

As these issues have continued to be debated in the literature, practitioners have been confronted regularly with the practical questions of functioning in the schools. As is expected, when issues remain unresolved in the literature, practitioners have found their own solutions to daily problems and, in doing so, they have taken many and divergent paths. As a result, practices now differ greatly in states and in school districts throughout the United States. If there is a generalization to be made regarding practices among practitioners, however, it is that a trend is discernible toward less dependence upon formal (standardized) test results and toward more reliance upon team involvement and subjective professional judgments, in decision-making processes.

Prevalence, Referral, and Eligibility Rates

Much concern has been expressed in the literature, and continues to be expressed, regarding the increase in LD placement rates, nationwide, over the past 20 years. Finlan (1992) indicates that, in the seven years following the enactment of PL 94-142, an increase of 127% occurred in LD placements, although the total school population increased only 12% during that time. Kavale and Reese (1992) reported an increase of 140% in LD placements nationally, between 1975 when PL 94-142 was enacted and 1987-1988; and the United States Department of Education, according to Fugate, Clarizio, and Phillips (1993) identified an increase of 160% in LD placements between 1975 and 1991.

Prevalence rates (the number of students with learning disabilities compared to the total district population) varied considerably across states and across districts within states, during this period. According to Finlan (1992), the mean rate across states was 4.78%. A 1989 federal report indicated that Georgia had the lowest prevalence rate, at 2.19%, and Rhode Island had the highest, with 8.66%. In Oregon (Vergun & Chambers, 1995), prevalence rates varied from 7.9% to 14.7% across districts in the state. The upward trend in LD placement rates led to the establishment of a National Task Force on Learning Disabilities (Woolman & DiSanto, 1990), which determined that overidentification of LD students in fact had occurred nationwide. After studying LD identification practices in one state, Colorado, Shepard and Smith (1983) concluded, "The overidentification of pupils in the LD category was the single most important finding from the study" (p. 124) and, "The inescapable inference that should be drawn from this study is that too many children have been labeled inappropriately by well intentioned professionals operating in a system that attempts to meet the needs of too many children who are unsuccessful in regular classrooms" (p. 125).

Wisconsin, too, has experienced significant increases in special education population. Between 1976-1977 and 1995-1996, Wisconsin's private and public school enrollment decreased 8.9%. During this same period, however, its special education population increased 84%. Between 1976-1977 and 1995-1996 Wisconsin's LD population increased from 1.28% to 4.04% of the total private and public school population and from 24.7% to 40.7% of the total special education enrollment. Prevalence rates by school districts varied from 1.4% to 10.4% during the 1994-1995 school year, the year in which data was collected for this study.

Several reasons for the continuing increase in numbers of students with learning disabilities are suggested in the literature. Some (Hallahan, Keller, & Ball, 1986) believe the increase is due to the impreciseness of the LD definition. Finlan (1992) agrees, but also believes that overidentification reflects the "large numbers of underachieving youngsters who need academic help" (p. 129). "The numbers of students labeled as LD will probably continue to rise," Finlan states, "due to the lack of an operational definition of LD and a seemingly endless number of underachieving students who cannot be distinguished from LD students based on past practice" (p. 133). McLesky and Waldron (1990) suggest that the problem rests in the inability to differentiate LD students from slow learning students, because psychometric measures are inadequate for the task.

Others have warned against overreaction to perceived overidentification for learning disabilities. Frankenberger and Fronzaglio (1991), for example, have stated that, nationwide, past trends toward increasing identification are now stabilizing; that whereas, before 1984, the annual growth rate of LD incidence was about 14%, between 1984 and 1990 it was only 2.5%. Furlong and Yanagida (1985) reported a 52% eligibility rate for ethnically diverse students who were initially referred for evaluation in Hawaii; and Furlong (1988) reported a 60.5% evaluation to placement ratio for six rural and urban school districts in California. More recently, however, lower evaluation to placement rates have been discerned. Payette, Clarizio, Phillips, and Bennett (1995), for example, reported an evaluation to placement rate of 58% among urban and nonurban students; and Fugate, Clarizio, and Phillips (1993), when studying 12 suburban and rural school districts with predominately White populations, found that 54% of those referred had been found eligible for LD services.

Frankenberger and Fronzaglio (1991) indicate that one reason for initial increases in LD incidence was that low achieving students were misidentified as LD, and they express concern for a lack of appropriate programs for children in regular education programs. But, they are also concerned that some states have overreacted to suggestions that LD is primarily a category for underachievers and, "perhaps states are employing IQ cutoffs to limit the population of children who may qualify for LD services" (p. 499).

Fugate, Clarizio, and Phillips (1993) further caution that the ideal placement to referral rate is not known:

> Perhaps these arguments serve to point out the most basic of realities--that a definitive referral-to-placement ratio may be a moving target, and that we lack a clear understanding of the factors that influence it. Moreover, professionals have not addressed the issue of what a desirable referral-to-placement ratio is. . . . We must be cautious in our assertions that something is 'good' or 'bad' when we do not have reasonable criteria by which to make such judgments (p. 415).

IQ Scores and Discrepancy Models

Discussion of IQ scores and discrepancy models is not readily dichotomized, because IQ scores are one component of many discrepancy formulas, and also because IQ scores are correlated to some extent with the achievement measurements which constitute another component of discrepancy formulas. Therefore, while efforts have been made to separate these for purposes of discussion, below, the two terms inevitably intermingle in the field.

IQ Scores

The concept of IQ scores as measures of intelligence has always been controversial. In particular, the assumption that a single score can be used to represent an individual's intellectual ability or potential has long been considered problematic (Osgood, 1984; Siegel, 1989a; Siegel 1989b; Stanovich, 1989; Wong, 1989a). Osgood (1984) reports that Alfred Binet himself criticized the use of a single test score to describe intelligence, and that Binet believed the IQ score was best used only as a general guide in the identification of students who could benefit from special education. IQ testing has further been criticized because of low inter-test reliabilities (Siegel, 1989a), and because IQ tests are subject to cultural bias (Graham & Harris, 1989;

Osgood, 1984, Siegel 1989a). More immediate to the LD identification process, Clarizio and Bernard (1981) assert that IQ tests, in this case specifically the WISC-R, fail to differentiate learning disabilities from mild emotional disturbance or mental retardation, based on subtest analyses. Furthermore, the use of any IQ scores to identify LD students is considered to be inappropriate by some (Siegel, 1989a; Baldwin & Vaughn, 1989) because, IQ being correlated to some extent with achievement, it is predictable that the intellectual ability of students with lower achievement scores (e.g. LD students) will to some extent be underestimated by IQ tests (Siegel, 1989a). Stanovich (1989) agrees, suggesting that IQ scores should not be included in discrepancy formulas and that, if discrepancy measures must be used, comparisons of reading and listening comprehension are preferable to comparisons of IQ and achievement.

Many consider the concept of normal intellectual functioning, which is frequently described as average or above average IQ, central to the definition of learning disabilities (Graham & Harris, 1989). Others, however, do not find this to be the case. The National Joint Council of Learning Disabilities, for example, recommends against any IQ limitation as part of an LD definition (Cole, 1993); and Siegel (1989a) contends that the concept of IQ would best be eliminated entirely from all definitions of LD. Baldwin and Vaughn (1989) agree, reminding us that Cruickshank has contended for years that IQ should not be considered as a prerequisite for LD identification.

The use of specific IQ cutoff points in the identification of learning disabilities is another area of unresolved controversy. The LD cutoff of 90 has been attacked, especially given that the mean IQ of many LD sample groups falls between 87 and 93 (Piotrowski & Siegel, 1986), and that even students with IQ scores at or below 80 may succeed academically in school (Siegel, 1989a). While maintaining her more extreme position that IQ should be eliminated entirely from identification of LD, and that reliance should instead be upon achievement scores and exclusionary criteria, Siegel also states that, if IQ must be used in LD identification, then a cutoff score of 80, rather than 90, should be used. Baldwin and Vaughn (1989) agree with Siegel's position stating:

> We do not know of any disease organisms, birth defects, or neurological disorder which selectively attacks humans with above-average intelligence. If this is true, then a child with an IQ of 50 is just as likely to suffer from a learning disability as a child with an IQ of 150 (p. 520).

Other professionals argue that use of IQ is still an important component in the LD identification process. Graham and Harris (1989), for example, contend that Siegel's recommendation to identify LD by achievement and exclusionary factors, thus eliminating IQ from the definition, is premature. Cole (1993) also disagrees with Siegel, refuting her claim of low performance on IQ tests by LD students. In fact, Cole suggests, LD students do comparatively well on such measures. Meyen (1989) suggests that maintaining the concept of normal functioning is reasonable; and Wong (1989b) pronounces that, in fact, the field is not yet willing to give up the IQ as a test of intellectual ability, or as a component of the definition of LD. Bryan (1989) and Wong (1989a) remind us that both the IQ score and the discrepancy concept were critical to the early differentiation of LD from the well known and long established category of the educable mentally retarded (EMR). Bryan contends that there certainly would be strong resistance, on this basis, to any serious attempt to eliminate IQ or the concept of normal functioning from the definition of LD. Furthermore, they cite practical political and social reasons for maintaining this distinction.

Attacks on IQ tests themselves have also been vigorously refuted. Although numerous instruments are available to measure IQ, the Wechsler Intelligence Scale for Children (WISC) and its revisions have been most prominent in testing for learning disabilities, according to surveys of school psychologists (Braden, 1995). Graham and Harris (1989) defend the validity of the Wechsler Scale for Children-Revised (WISC-R), and Bryan (1989) observes that the IQ test remains the best method available for predicting academic achievement.

Discrepancy Models

The discrepancy model is based on the concept that those students are eligible for LD services who have at least average potential for learning (this potential is usually based on students' scores on an IQ test) but who, for reasons attributable to an innate disability, function significantly below that potential for learning (usually measured by various achievement tests). Although this underlying principle is central to most definitions of LD, and Reynolds (1992) asserts that the severe discrepancy model "is the most consensually validated criterion available" (p. 3), the model and its implementation have come under increasing criticism in recent years. The major criticism of the discrepancy model has been voiced by Siegel (1989a, 1989b), Stanovich (1989), and Graham and Harris (1989), and pertains to the relationship between intelligence, as measured by IQ tests, and achievement. Siegel (1989b) sees, as the underlying assumption of the IQ-discrepancy model, the belief that intelligence and achievement are independent of one another, and, therefore, that the presence of a learning disability does not affect IQ scores. She and others severely berate the model on that issue, contending that, although the discrepancy model is based on the assumption of independence between IQ and achievement, such independence does not in fact exist. To clarify their point, Siegel (1989a) and Stanovich (1989) discuss the Matthew Effect which, they state, occurs when an initial specific problem evolves into a more generalized deficiency. Their argument is that, because a causal relationship exists between achievement and IQ, reduced achievement reduces IQ. Therefore, they state that students with a learning disability, because this disability by definition results in lower achievement, will also have lower IQ scores (Stanovich, 1989). This argument provides both an explanation for the lower IQ scores of LD students and a rationale for the elimination of the discrepancy model for identifying students with LD. How can we contend, they ask, that identification of students with learning disabilities is predicated on a discrepancy between two variables, when these two variables are causally related? That is, how can normal intellectual functioning be required in the identification of a child with learning disabilities, when those learning disabilities themselves are likely to produce subnormal functioning?

Other researchers (Cole, 1993; Lyon, 1989; Piotrowski & Siegel, 1986) have taken Siegel and Stanovich to task on this issue. Their argument for elimination of the discrepancy model might have substance, these other researchers agree, if a one-to-one relationship existed between IQ and achievement; but, they state, while there is some relationship between these two variables, it must be recognized that IQ is influential in a multivariate context. Lyon (1989), in particular, refutes Siegel's argument that standard IQ measures are not valid measures of intelligence because they are confounded by achievement. "But intelligence is not orthogonal to academic achievement. How can IQ scores be relatively good predictors of academic skills if they are unrelated?" (p. 505).

Siegel then, as stated above, argues for the complete elimination of the discrepancy model for identification of LD, in favor of a model using only achievement and exclusionary data. A more widely held and more conservative view seeks only to eliminate the use of discrepancy formulas, not the principle of significant discrepancies itself. Those with this view dislike the use of formulas for two reasons. One reason is because each of the various formulas in use identifies a different set of students as learning disabled. Siegel (1989a), for example, tells of a study in which, when various discrepancy formulas were applied to a given group of students, proportions identified as LD ranged from 10.9% to 37% of the group. Another problem is that no agreed upon criterion exists for determining a level of severity sufficient to constitute a significant discrepancy. For instance, some states identify a significant discrepancy as being 40% to 50% of expected achievement; other states identify a significant discrepancy as achievement and IQ score differentiated by two standard deviations, one and one-half standard deviations, or one standard deviation; and some states set no standards for significant discrepancy, allowing it to be whatever an M-team decides it to be (Mercer, King-Sears, & Mercer, 1990).

Researchers have attempted to analyze the effects of different methods of quantifying severe discrepancy on the number of students diagnosed as LD. Four such methods were identified by Cone and Wilson (1981) which included: deviation from grade level, expectancy formula, standard score comparisons, and regression analyses. Frankenberger and Harper (1987) found that 16 states used one of these four approaches for identifying students with learning disabilities in 1981, and that the number had increased to 28 in 1985. By 1989, 37 states were using one of these approaches (Frankenberger & Fronzaglio, 1991). Finlan (1992) examined LD placement rates for states, based on the methods used to quantify a severe discrepancy, and found that two of the four lowest identifying states (Wisconsin and Louisiana) used an expectancy formula and two (Georgia and Kentucky) used a standard score requirement. Braden (1987) found that the regression model identified the same percentage of students across IQ levels, whereas the simple difference method identified fewer students with IQs below 100. Evans (1992) compared placement decisions for 194 students in an Arkansas school district and concluded that the regression model identified a slightly higher percentage of students than did the simple difference model. He concluded that this would result in an identification rate of 4.4% instead of 4.0%. Payette, Clarizio, Phillips, and Bennett (1995) found "an increase in the number of students identified as having a severe discrepancy if the method for determination was changed from a simple difference to a regression equation, when those referred are below average in IQ and the cutoff was held constant" (p. 99). The trend toward the use of the regression model rather than the simple difference model for identifying students with learning disabilities is confirmed by Mercer, King-Sears, and Mercer, (1990).

Numerous additional complaints have been registered in the literature against the use of discrepancy models. Lyon (1989) argues that all IQ versus achievement discrepancy processes are problematic, because all formal tests, and thus the discrepancy calculations, are subject to measurement error. Furthermore, Lyon states, the concept of discrepancy is not specific to LD populations, nor is any specific discrepancy calculation representative of all LD individuals. Lyon also disparages discrepancy processes because they provide no assistance in developing teaching programs. Graham and Harris (1989) contend that both test scores and discrepancy formulas should be abandoned in the decision making process; and the Board of Trustees of the Council for Learning Disabilities has opposed the use of any discrepancy formula for LD (Council for Learning Disabilities, 1986).

Siegel (1989a), referring in this case specifically to reading disabilities, argues that the discrepancy model underidentifies students for LD. Acknowledging that others have favored the use of a discrepancy model specifically because it minimizes the number of students identified for LD, Siegel opposes the model for this identical reason. Siegel's contention (1989a) is that there is no need to limit the number of students identified as learning disabled, because there is no evidence that either overidentification or misidentification has occurred.

Meyen (1989) comes to the defense of the discrepancy model in its function of limiting the number of students identified for LD services. Arguing that special education has always developed definitions which restrict services to those who truly need them, Meyen believes that one of the purposes for determining eligibility is the elimination of false positives. Admitting that a discrepancy model is certainly more stringent than the achievement based model proposed by Siegel (1989a), Meyen argues that, indeed, it ought to be. If achievement deficiencies were the only element in learning disabilities, he insists, we would consistently overidentify as learning disabled those who are actually low achievers, minorities, males, or students with different language backgrounds. If, Meyen (1989) continues, we were certain that commitment existed and that resources would be allocated to serve all children with achievement deficiencies, then an achievement-discrepancy model would be justified. But, until such commitment is apparent, and until the structure of our schools is such that the needs of all students can be met, it is judicious and practical to identify as learning disabled only those students who most clearly require special education services and who meet the more stringent criteria for eligibility which an IQ-achievement discrepancy model provides. Finlan (1992) says that the use of any discrepancy requirement (expectancy formula, standard score, grade level expectancy, or regression equation) "may help reduce the number of inappropriate placements resulting from labeling students as LD" (p. 129).

Cole (1993) provides a compelling case for use of a regression model to define and delimit learning disabilities. IQ test scores provide a reasonable measure of a student's potential, according to Cole, and the discrepancy between this potential and the student's achievement can be appropriately inferred if regression of achievement test scores toward the mean is taken into consideration. The most prominent error made by those who criticize the discrepancy model, Cole (1993) contends, is:

> They fail to take full account of the complex nature of the correlation between the predictor and criterion variables inherent to the LD diagnosis. Such an omission leads to distortion of the discrepancy formulation and errors in the diagnosis of learning

> disabilities. An understanding of valid means of assessing the discrepancy between IQ and the criterion requires an understanding of the basic theory of regression analysis (p. 19).

Many find it incongruent, Cole adds, that students have difficulty with achievement tests when they score well on IQ tests which require the same cognitive abilities as the IQ tests. Cole (1993) explains this seeming incongruence as "variables unrelated to IQ, shown to be inherent in the way students with LD process information, are causally related to achievement test scores" (p. 14). These other variables, according to Cole, produce the discrepancy between potential for achievement and the achievement deficits that are commonly found in the LD student's achievement scores.

Cole succinctly defends continued use of the discrepancy component within the LD definition.

> The essential diagnostic criterion for LD is that the student perform significantly better on a test of the broad range of cognitive functions (the IQ test) than on an achievement test (pp. 13-14). The diagnosis of learning disabilities requires that there be a clear distinction between a potential for a particular function and the performance of that function (p. 19).

Support for a regression model is also indicated by Reynolds (1992) as he contends that, with the exception of the regression model, all other models result in more misclassifications than necessary. This is especially true for the grade-level discrepancy model, according to Reynolds.

Current Trends and Prevalent Practices

Two groups of researchers (Mercer, King-Sears & Mercer, 1990; Frankenberger & Fronzaglio, 1991) who used similar procedures to gather information from state departments of public education, arrived at similar, though not identical, conclusions regarding IQ requirements in the various states for LD identification. Both groups of researchers sent letters, and then followed up with telephone calls to states from which no responses to letters were received. Thus, Mercer, King-Sears, and Mercer (1990) reported information from all 50 states and the District of Columbia, which revealed that 16 of those states required an IQ score that was average, or above the CD level, for LD identification. Frankenberger and Fronzaglio (1991) also reported information from all 50 states and the District of Columbia, but chose to omit from consideration three states, Colorado, Massachusetts, and South Dakota, which ran noncategorical programs.

From the remaining 47 states plus the District of Columbia, Frankenberger and Fronzaglio identified 14 states plus the District of Columbia, which required IQ scores in the average range, for determination of LD. Eight of these states, however, did not specifically define their use of the term *average* (p. 496). Mercer, King-Sears, and Mercer, in their study, had mentioned 11 of the same states as Frankenberger and Fronzaglio mentioned, as having IQ requirements above average, or above the CD level. The disagreement between the studies, regarding IQ requirements in six states and the District of Columbia, is not explained.

Frankenberger and Fronzaglio (1991) described how changes regarding the IQ requirement for LD identification had occurred over time. In 1981 only three states specified IQ cutoff ranges above the level of mental retardation and, by 1985-1986, only one state, Wisconsin, maintained such a cutoff. This downward trend reversed after 1986, however, and by 1990, six states (including Wisconsin) required IQ cutoff levels above the mentally retarded range. These cutoff levels ranged, in the various states, from 77 to 90. Between 1988 and 1990, according to Frankenberger and Fronzaglio, 40% of the states had revised their guidelines for identifying students with LD.

These same two research teams (Frankenberger & Fronzaglio; Mercer, King-Sears, & Mercer) also studied practices in state departments of education regarding use of a discrepancy component in identification of LD. Once again, they arrived at similar but not identical conclusions. Frankenberger and Fronzaglio (1991) reported that 11 of the states did not, at that time, use any discrepancy component. Of those states which did incorporate a discrepancy component, 20 states recommended the use of standard scores, some with and some without a regression procedure. Seven other states recommended use of a regression formula; four states, including Wisconsin, used expectancy formulas to determine discrepancies; two states recommended a deviation from expected grade levels; and one state (New York) required a 50% discrepancy but didn't state how this was to be determined. Frankenberger and Fronzaglio (1991) indicated that of the states using discrepancy components, six used a 1 *SD* cutoff between expected and actual achievement; two used a 1.35 *SD* cutoff; seven used a 1.5 *SD*; one used a 1.75 *SD* cutoff; and three states used a 2 *SD* cutoff for determining the significant discrepancy level.

As mentioned earlier, results reported regarding discrepancy components by Mercer, King-Sears, and Mercer, were similar but not identical to results reported by Frankenberger and Fronzaglio. Mercer, King-Sears, and Mercer (1990) indicated that 18 states used standard scores alone, when determining discrepancies; 23 identified a cutoff between expected and actual achievement as being between 1 to 2 *SD*; and 12 states recommended use of regression formulas. Mercer, King-Sears, and Mercer (1990) identified 3 states, including Wisconsin, which required a discrepancy of 40% to 50% or more between aptitude and achievement; and 11 states which did not describe how the discrepancy should be determined. Mercer, King-Sears, and Mercer found that reading and writing were identified as deficiency areas indicative of LD in 96% of the state definitions and/or identification criteria studied. Arithmetic was included in both definition and criteria in 94% of the states studied. Spelling, however, was included in state definitions only 80% of the time and in identification criteria only 20% of the time. The researchers conjectured that, because the category of written expression may include spelling in some states, there may be less likelihood than before of states including spelling in their definitions and criteria, as an area indicative of learning disabilities.

In addition to the information regarding recent practices nationwide in identification of learning disabilities, three research teams have studied identification practices in depth, in specific states. Shepard and Smith (1983) studied such practices in Colorado; McLesky and Waldron (1990) studied practices in Indiana; and Kavale & Reese (1992) studied Iowa's LD identification procedures.

Two of these states, Colorado and Iowa, provided information regarding referral sources. In both, classroom teachers were the primary source of referrals, with 76% of LD referrals in Colorado and 74% of LD referrals in Iowa being made by the classroom teacher. In both of these states, parents were the second most frequent source of referrals, with 8% of LD referrals in Colorado and 9% of LD referrals in Iowa being parent initiated.

Indiana and Iowa provided information regarding LD identification rates by gender. In Indiana, 75% of those identified LD were males and 25% were females. In Iowa, the proportions of males and females were 70% and 30% respectively.

Only Indiana provided information regarding age and grade in school of students referred for learning disabilities. The most frequent referral age was 8 years of age, and the most frequent grade in school was 1st grade. Iowa provided information, however, regarding the proportions of students referred from each grade level who were offered placement in LD programs, and regarding proportions offered placement from elementary and secondary levels. Unlike proportions usually reported in the literature, in Iowa 49% of students placed in LD programs were at the elementary, and 51% were at the secondary level. Of those at the elementary level, 9% were at the preschool level, 21% were at 1st grade, 21% were at 2nd grade, 17% were at the 3rd grade, 12% were at 4th grade, and 7% were at the 5th grade level, when referred and found eligible for LD services.

In both Iowa and Indiana (Kavale & Reese, 1992), the Wechsler tests were used most frequently for determining levels of intelligence (in Indiana 88% of the time, in Iowa 93% of the time), with the Stanford Binet following as the second most frequently used (Indiana 9%, Iowa 7%). To estimate particular students' intellectual ability, in Indiana, full-scale IQ scores from the Wechsler were used 90% of the time, verbal scores were used 6% of the time, and performance scores were used 4% of the time. The mean full-scale IQ score for students identified LD in Indiana was reported to be 93.8. In Iowa, the mean full-scale IQ of those identified for LD was 96.49.

Indiana reported information regarding achievement tests used. The most frequently used achievement test, in Indiana, was the Wide Range Achievement Test (used 57% of the time). Other achievement tests, in order of frequency of use, were the Woodcock-Johnson PsychoEducational Battery (45%), the Basic Achievement Skills Indiana Screening (15%), the Kaufman Test of Educational Achievement (10%), and the Peabody Individual Achievement Test (7%). Colorado did not report frequency of use of specific achievement tests, but did report that, on average, six to seven achievement tests were used in assessment of students referral for LD.

Finally, Colorado reported that, on average, M-teams include seven to eight members. No other state reported average membership; but Iowa reported percentages regarding participation at M-team meetings by various professionals within the district. These are school psychologist (90% of the time), regular education teacher (76%), special education teacher(73%), and principal (72%). Parents (reported as mothers) were also present 80% of the time, at M-teams in Iowa, when existence of a learning disability was being determined.

It becomes clear from the review of the literature that, although IQ testing has been broadly criticized, the use of IQ scores nevertheless still plays a major role in the determination of LD. Similarly, in spite of controversy, the concepts of normal or potential for normal intellectual functioning, and the formulation of discrepancies between these and academic achievement, are still major components in LD definitions and eligibility criteria (Cole, 1993; Graham & Harris, 1989). At the same time, however, a trend is discernible toward less absolute reliance upon formal test scores and discrepancy formulas, and toward more reliance on professional judgment of M-team members. Increasingly, researchers and professional organizations are taking positions in support of this trend. Among researchers, Osgood (1984) has argued that test scores should be just one element in the determination of learning disabilities, and Graham and Harris (1989) have called for decisions regarding LD placement to be based upon professional judgment that is soundly advised by multifaceted assessment. Among professional organizations, the Board of Trustees of the Council for Learning Disabilities has recommended, along with the elimination of discrepancy formulas, a renewed focus on comprehensive diagnostic evaluations (CLD, 1986). Finally, in their "Proposed New LD Criteria", which was presented on May 10, 1995, to the Office of Special Education Programs, The Learning Disabilities Association, The National Joint Committee for LD, and The Division for Learning Disabilities of the Council for Exceptional Children proposed, together, alternative criteria for determination of learning disabilities for children in grade 3 and below. These proposed new criteria follow the trend away from absolute reliance on IQ scores and on discrepancies into which IQ scores are factored. The recommendation is for the M-team to determine that a student in grade 3 or below has a specific learning disability, if the student does not achieve commensurately with his or her age or ability levels in one or more of these areas: oral expression, listening comprehension, basic reading skills, reading comprehension, basic writing skills, written expression, mathematics calculations, or mathematics reasoning; and if that student has unexpectedly poor performance in one or more of the areas which research has demonstrated are indicators of academic failure.

In practice, M-team members may always have depended less on IQ scores and discrepancy measures, and more on their own professional judgment than researchers, state departments, and professional organizations have realized. Pending resolutions of these issues within the literature, such practitioners, it appears, have to a large extent based decisions regarding LD eligibility on conditions prevalent in their own school settings and on their own knowledge of the needs of the child.

Ysseldyke, Algozzine, Richey, and Graden (1982), after reviewing videotapes from 38 M-team meetings, concluded that neither the federal government's criteria nor discrepancies between ability and achievement had played any major role in the determinations by these M-teams of eligibility for LD programs. As reported by Ysseldyke, et al, statements indicating the existence of a discrepancy between potential for achievement and actual achievement had been presented at 55% of these M-team meetings. Nevertheless, LD placement was rejected, at these meetings, 33% of the time. On the other hand, at meetings where no discrepancy information had been presented, students were found eligible for LD 56% of the time. In 15 of 20 meetings reviewed by Ysseldyke, et al, information in support of federal definitions was presented. Of the meetings in which the student was determined eligible for LD services, compliance with these federal criteria was confirmed 71% of the time. Conversely, however, compliance with federal criteria was also confirmed in 83% of the cases in which the student was found ineligible for LD services. Neither federal criteria nor noted discrepancies, then, predicted placement decisions in these cases. Ysseldyke, et al, concluded that the formal information presented at these M-teams played only a minimal role in the placement decisions. In fact, they stated, "It looks as if decision makers use assessment data to support or justify decisions that are made independent of the data" (p. 42). Support for the same overall conclusion was further found in a study by Dangel and Ensminger (1988), when they examined school records for 379 students who had been referred for learning disabilities evaluations. About half of the students in that study who did not score below the severe discrepancy cutoff were nevertheless placed in LD classes, on the basis of the professional judgment of the M-team.

Another study by Algozzine, Christenson, and Ysseldyke (1982) found teacher referral to be the single most important factor leading to placement in special education. This suggests that the factors which cause teachers to refer students for special education are the same as those which lead to placement of students, by M-teams, into special education programs. This finding is not unexpected. Still other research by Ysseldyke, Christenson, Pianta, and Algozzine (1983) has provided evidence that most teachers refer students primarily because they expect some assistance in meeting the educational needs of these students, not because they are interested in determining handicap according to any set of criteria; and Gerber (1984) has stated that the practical concerns of teachers about ability to instruct a student supersede the teacher's interest and ability in implementing law. Teachers, in fact, may be quite aware when their ability and resources are inadequate to provide a successful educational program for students (Gerber & Semmel, 1984). Gerber (1984) cautions us, therefore, that "Special education policy may limit who can be labeled as learning disabled, but it cannot make schools capable of responding effectively to atypical learners" (p. 221). It is, perhaps, this perceived need for assistance and the degree of a teacher's confidence in his or her ability to instruct, which leads teachers to process or to reject referral of a given student and, once the student is referred, to influence the likelihood of placement.

Prevalence of Ethnic Groups in Special Education

The number of students identified as eligible for special education clearly has increased significantly since 1975. This increase, however, has not occurred proportionately across all racial groups (Collins & Camblin, 1983; Chinn & Hughes, 1987; Harry, 1994). On the contrary, disproportionate representation of ethnic groups in special education has consistently been reported, with specific impact upon groups varying according to handicapping conditions.

The concepts of over and under representation based on ethnicity have generally been discussed in terms of the percent of students found eligible for special education in relation to the prevalence of that ethnic minority in the population at large (Reschly, 1991; Harry, 1994). For example, if a given racial or ethnic group comprises 5.4% of the public school enrollment, but 7.4% of the LD population, then that group is said to be over-represented in the LD population (Illinois State Board of Education, 1990-91). Outcomes of ethnic representation studies have varied, depending upon geographic regions studied, states, subgroups within categorization schemes, and the year in which the study was done. However, definitive data from the National Longitudinal Transition Study (NLTS) of secondary-aged special education students (OSEP's Fourteenth Annual Report, 1992, as reported in Harry, 1994) reported that, in the LD category, White students were under-represented in special education programs, and both Black and Hispanic students were over-represented. This data is particularly useful, because it is based on a large randomly selected group of over 8000 secondary-aged special education students.

Johnson (1991) reports that American Indian students are also over-represented in LD special education programs. Although American Indians comprise only about 3% of the general population, about 8.72% of these are categorized as LD by the Bureau of Indian Affairs (BIA), and 5.28% are categorized as LD by the United States Department of Education, Office of Civil Rights (OCR). Again, this data is impressive, since BIA schools educate 10% of the American Indian student population; and the OCR data represents 85% of the American Indian students who are educated in public schools.

Disproportionate representation of minorities in special education is frequently believed to result from discriminatory identification and placement practices (Dent, Mendocal, Pierce & West, 1991). Others, however, caution greater circumspection, suggesting there may be defensible reasons for disproportionate representation. Furthermore, there is little evidence to support claims of discriminatory placement practices (Reschly, 1991; Harry, 1994). Hoff (1992) reported that, up to that time, OCR had in fact documented only two cases where violations of anti-discriminatory laws had occurred.

A particularly interesting bit of information from the NLTS study was that Black and Hispanic youth are over-represented in nonjudgmental categories of special education (e.g., visually impaired or deaf), as well as in the judgmental categories, such as learning disabilities and mental retardation (MR). This, plus the fact that minorities are also over-represented in Head Start programs, Chapter One and Project Follow Through, brings into contention any assumption of discrimination in the more judgmental LD and MR categories (Reschly, 1991; Harry, 1994). Some contend that higher rates of minorities are expected in programs such as Head Start, Chapter One, and Project Follow Through, because these are intended to serve children from low socioeconomic groups, and minority groups are more likely than Whites to be of lower socioeconomic status. Others have attempted to forge a similar link between poverty and special education, associating poor prenatal care, inadequate postnatal health care, deficient diet, and other poor environmental conditions with a need by children for special education (Illinois State Board of Education, 1990-91). Barona, Barona and Faykus (1993) refute such contentions, however, reporting that, although low socioeconomic status has frequently been associated with higher referral and placement rates in special education, where WISC-R factors were controlled, "no sociocultural variables significantly contributed to predicting LD eligibility" (pp. 71-72).

It appears, then, that for reasons which are not understood, minorities are frequently over-represented in special education classrooms and, although results are mixed, it appears that minorities are over-represented in LD classrooms as well. Such disproportionate representation may or may not be a problem, but if the identification process for LD is conducted in an unfair manner or with invalid instruments or processes, then these results must be considered problematic (Harry, 1994).

RESEARCH DESIGN

Population and Samples

The study population was defined as all students in Wisconsin who were referred for LD consideration during the 1994-1995 school year. A stratified random sample of 25 districts was drawn, which included small, medium and large districts. These were further stratified according to their LD prevalence rates. In addition, two assigned samples were included in the study. These were the five multiple complaint districts (assigned by DPI because more than one parent complaint regarding LD services had been received from each), and the parent-nominated group. This group was composed of cases nominated by parents who were dissatisfied with determinations of ineligibility for LD in their own children's cases.

Population

Since the purpose of this study was to investigate whether Wisconsin's LD eligibility criteria systematically exclude students from placement and services, the study population was defined as all students who were referred for LD consideration, in the 426 school districts in the state of Wisconsin, during the 1994-1995 school year.

From this population, it was necessary to draw a sample of cases which realistically could be handled within the time constraints imposed on the study. Therefore, out of the total population of all school districts in the state of Wisconsin, a primary sampling unit was identified as all K-12 school districts. Thus, for this first sampling stage, Wisconsin's 10 union high school districts and its 47 K-8 districts were subtracted from the 426 districts composing the total population, leaving a total of 369 (K-12) school districts in the sample at this stage.

Five of these 369 school districts had already been identified by Wisconsin DPI, in its agreement with OSEP, as districts to be included in the study. These five districts had each been the subject of multiple (i.e., more than one) parent complaints regarding their LD eligibility criteria. Because these districts had already been identified for inclusion in the study, they could not be included among those from which the random sample would be drawn. Therefore, these five districts were identified as a separate group regarding which data collection and analysis would occur. Removal of these five districts from the pool from which the random sample would be drawn resulted in 364 districts remaining in the pool. For these 364 districts, information was provided to the researchers, by the DPI, which included names of the districts, total public and private school enrollments (termed size of district for research purposes) in each, LD student counts in each, and LD prevalence rates for each of the 1992-1993, 1993-1994, and 1994-1995 school years. Explanations of the terms *prevalence rates* and *size of district* are presented later in this report, along with more information regarding how these were determined.

Random Sample

To reduce selection error and to insure unbiased data collection and analysis, a system of stratified random sampling was developed. This involved, first, the stratification of the 364 K-12 districts remaining in the sampling frame into subgroups (strata) based on the information provided by the DPI regarding district size and LD prevalence. When stratification of subgroups based on size and LD prevalence was completed, proportionate random samples were selected from each subgroup.

LD Prevalence Rates

The LD prevalence rate, the number of LD students divided by the total number of enrolled students, was calculated for each school district, for each of the 1992-1993, 1993-1994, and 1994-1995 school years. The mean LD prevalence rate of each district for this 3-year period was then determined. These mean prevalence rates ranged, for the 364 districts still within the sampling frame, from 1.46% to 10.80%, thus producing a grand mean of 4.67% and a standard deviation of 1.42%. Of the 364 districts within the sample pool, 258 (70.87%) had prevalence rates between +1 and -1 *SD* from the mean, and were considered average prevalence rate districts. Forty-nine school districts (13.46%) had prevalence rates falling below -1 *SD* from the mean and were considered low prevalence rate districts. Fifty-seven school districts (15.65%) had prevalence rates above +1 *SD* from the mean and were considered high prevalence rate districts.

For each of the three prevalence rate strata thus determined, after the probability of selection was calculated for each district, that same proportion was calculated for a proposed final sample of 25 school districts, with the resultant fraction rounded to include an entire district. Therefore, from the total of 25 school districts proposed to constitute the final sample for this study, it was determined that 4 school districts would be drawn from the low prevalence strata, 17 school districts would be drawn from the average prevalence strata, and 4 school districts would be from the high prevalence strata, based on LD prevalence rates.

School District Size

Upon completion of LD prevalence rates, a second basis for stratification, school district size, was considered. School districts with 9,500 or more enrollments were identified as large districts. Although 15 large school districts were included among the 358 average prevalence group of districts, and 2 large school districts were included among the 49 low prevalence group of districts, there were no large school districts within the high prevalence strata. A table of random numbers was used to select one large school district from the low prevalence and one from the average prevalence strata respectively. One large school district from the low prevalence sample was disproportionately greater than the number of large districts represented in the population of schools, but one was the minimum number of districts that could be drawn.

Because severe time constraints had been imposed for completion of this study, it had been decided early in the selection process that, given the choice between a proportionate representation (in relation to the population) of students from large school districts versus a larger number of school districts, the choice would be to select a larger number of school districts. The rationale for selecting more districts rather than proportionate numbers by school district size was that identification and placement policies are more likely to vary across districts than within districts; therefore, selecting a larger number of districts would provide a broader sample of practices.

A table of random numbers was also used to select the balance of the sample; that is, all other school districts below 9,500 total school system enrollment. Three additional school districts from the low prevalence group, 16 additional districts from the average prevalence group, and 4 additional districts from the high prevalence group were thus selected for the sample. The overall prevalence rate of the 25 randomly selected school districts, it was found, was 4.63% which is almost identical to the 4.68% for the population of Wisconsin schools.

From the 25 randomly selected school districts, a total of 706 sets of student records was received. Nineteen of these were excluded from review, because they did not involve initial LD referrals from the 1994-1995 school year, or because the M-team evaluation was incomplete due to parents having refused permission for M-team evaluation, or because students had moved from the district or otherwise stopped attending school. Thus, a total of 687 student records remained to be reviewed and to be considered the sample of records for the randomly selected schools.

Demographic data for these 687 students is as follows: 441 (64.2%) of these students were males, and 246 (35.8%) were females. Frequency by chronological age of these students is presented in Table 1. The mean age of this group was 9.25 (*SD* = 3.17), in a range between 2 and 20 years.

Grade placement levels of these students are presented in Table 2. Grade levels with the three highest frequencies are: 1st graders (*N* = 116, 16.9%); 2nd graders (*N* = 110; 16.0%); and 3rd graders (*N* = 95; 13.8%).

Forty-seven of the students from the randomly selected schools (6.8%) were transfers from out-of-state, with 24 students having already received services in LD programs in their sending districts. A total of 106 students (15.4%) had repeated grades or had been retained prior to the 1994-1995 school year.

Table 1

Age Distribution for the Random Sample Group

Age	Frequency	Percent
2	2	.3
3	8	1.2
4	3	.4
5	31	4.5
6	84	12.2
7	109	15.9
8	110	16.0
9	78	11.4
10	49	7.1
11	45	6.6
12	45	6.6
13	41	6.0
14	32	4.7
15	18	2.6
16	19	2.8
17	7	1.0
18	4	.6
19	1	.1
20	1	.1
Total	687	100

Table 2

Grade Distribution for the Random Sample Group

Grade	Frequency	Percent
Preschool	32	4.7
Kindergarten	54	7.9
1	116	16.9
2	110	16.0
3	95	13.8
4	52	7.6
5	52	7.6
6	53	7.7
7	37	5.4
8	34	4.9
9	17	2.5
10	22	3.2
11	9	1.3
12	4	.6
Total	687	100

Assigned Samples

In addition to the randomly selected districts, researchers were required, per the OSEP/DPI agreement (See Appendix E), to include the Multiple Complaint districts mentioned briefly earlier in this report (those districts from which DPI or OSEP had received more than one parent complaint regarding LD identification processes and procedures) and a group of parent nominated cases. Specifically, the OSEP/DPI agreement had indicated that "up to 10% of the total sample size will include M-team reports identified from parents who believe that their children have been inappropriately denied eligibility for learning disabilities. DPI will inform the following organizations of the opportunity for parents to nominate students for inclusion in the study: Parent Education Project, CHADD, LD Association of Wisconsin" (See Appendix E).

Multiple Complaint Districts

From the five assigned Multiple Complaint school districts, a total of 465 student records was received. After excluding 28 records which were not initial LD referrals during 1994-1995, which were incomplete because parent permission for evaluation had not been granted, or because students had moved from the district or otherwise stopped attending school, a total of 437 student records remained and was considered the sample for the Multiple Complaint group. Two hundred sixty-six (60.9%) of the students in the Multiple Complaint sample were males, and 171 (39.1%) were females.

Frequency by chronological age of these students is shown in Table 3. The mean age of the group is 8.91 (*SD* = 2.95) in a range between 3 and 17 years. Grade placements for these students are presented in Table 4. The three most frequent grade levels are: 2nd graders (*N* = 77; 17.6%), 1st graders (*N* = 74; 16.9%), and 3rd graders (*N* = 70; 16%).

A total of 32 of these students had transferred into Wisconsin from another state, with 10 of the 32 having already been served in LD programs in their sending districts. A total of 87 students (19.9%) from Multiple Complaint districts had repeated grades prior to the 1994-1995 school year.

Table 3

Age Distribution for the Multiple Complaint Group

Age	Frequency	Percent
3	5	1.1
4	6	1.4
5	27	6.2
6	53	12.1
7	61	14.0
8	79	18.1
9	57	13.0
10	40	9.2
11	28	6.4
12	19	4.3
13	17	3.9
14	20	4.6
15	13	3.0
16	6	1.4
17	6	1.4
Total	437	100

Table 4

Grade Distribution for the Multiple Complaint Group

Grade	Frequency	Percent
Preschool	25	5.7
Kindergarten	32	7.3
1	74	16.9
2	77	17.6
3	70	16.0
4	44	10.1
5	29	6.6
6	22	5.0
7	19	4.3
8	18	4.1
9	13	3.0
10	10	2.3
11	4	1.1
Total	687	100

Parent Nominated Subjects

As indicated before, an agreement between Wisconsin's DPI and OSEP had prescribed that up to 10% of the total sample for this study would consist of cases identified by parents who believed that school districts in Wisconsin had inappropriately denied eligibility for LD. Between October and January, therefore, several requests were sent to the membership of Parent Education Project (PEP), Children with Attention Deficit Disorder (CHADD), and LD Association of Wisconsin (See Appendix G). These parent members were asked to nominate their children for the study if they believed their children had been inappropriately denied LD services. Additionally, these parent members were asked to notify other parents they believed to have a complaint. These requests were transmitted to parents by the representatives of the three groups who served on the project's steering committee. In total, 20 students were nominated by their parents, but 7 of these cases were received too late to be included in this report.

Profile Forms

With confidential information regarding family names, addresses, etc. obscured, and with district school and student code numbers assigned, all records were reviewed by trained evaluators, and relevant information was encoded onto an 8-page profile form (See Appendix H). Profile forms included the following categories: General Information (identified student characteristics, referral information, and other miscellaneous information such as, "Was an independent evaluation conducted prior to this referral?"), IQ Information, Achievement Information, Significant Discrepancy Information, Information Regarding Exclusionary Factors, and Need For Special Education.

In addition, a section was included on the profile forms which provided an opportunity for evaluators to form subjective judgments about M-team practices. That is, evaluators were asked to identify from the records any practices they found to be indicative either of over-restrictiveness or of flexibility, by M-teams, in the use of Wisconsin's LD identification criteria. Each evaluator was also asked to indicate whether the decision regarding LD eligibility could be considered a borderline or a clear-cut case. Complete record evaluations averaged approximately 45 minutes in length.

Developing the Profile Forms

Before the profile form was developed, a series of specific research questions and a process of analysis for answering those specific research questions had been developed. These specific research questions were keyed to the four research questions prescribed by OSEP and DPI. A primary reason for developing the specific research question format had been to guide the development of the profile form, attempting to assure that pertinent information would be extracted from the student records on the first inspection of those records. A first draft of the profile form was then developed by the research project staff. This draft form was revised numerous times before extraction of data from student records began, and again after trial runs with data extraction. Refinement of the profile form continued through the first 200 or so record evaluations, as evaluators found language that needed to be improved in order to assure a more objective and reliable data extraction process. Each time modifications to the profile form occurred, previously reviewed records were reanalyzed with the new format.

Student Records

At the beginning of the study, the researchers met with directors of special education from the school districts selected for participation in the research. Directors were introduced to the purpose of the study and presented with a list of the documents necessary for the study to be completed (See Appendix I). Additionally, directors were asked to complete a questionnaire regarding placement practices and test instruments used in their school districts (See Appendix J).

Selecting Student Records for Review From Large School Districts

Because of time constraints for completing the study, it was necessary to limit the total number of student records to be reviewed. Thus it was decided to delimit the number of records reviewed from large school districts (greater than 9,500 student enrollments). To produce an equivalent pool of sample information, individual schools from within large school districts were stratified by grade level and by minority group prevalence. For three of the districts, sampling of schools progressed until a student sample was selected from each that was greater than one-third of the total number of students referred for learning disabilities during the 1994-1995 school year, i.e., 35%, 36%, and 38%. The fourth large school district was proportionately reduced even more. From a total of 1459 students initially referred for learning disabilities in this district, during the 1994-1995 school year, a sample of 10.6% was chosen. A total of 154 student records was, therefore, selected for review from this school district.

To complete the sampling process described above, each of the four large (greater than 9,500 student enrollment) school districts initially provided information to researchers regarding all schools within their districts. This information included grade levels in each school, the number of students referred for LD from each school during the 1994-1995 school year, and the prevalence and type of minority populations served in each school. Although all large school districts were able to identify the prevalence of minority students within each school, not all districts were able to identify the prevalence by type of minority within each school; however the school district known to have the largest numbers of minority subgroups was able to do so. After stratifying by grade level and minority prevalence, a table of random numbers was used to randomly select the sample from these stratified groups. Once schools had been randomly selected, M-team records were requested for review for students referred during the 1994-1995 school year from these selected schools.

Selecting Student Records for Review From All Other School Districts

Twenty-six school districts included in the study, other than the four large school districts, submitted all M-team records for all students within their school who were referred for LD evaluation during the 1994-1995 school year.

Ensuring Confidentiality of Student Records

As student records were received from the school districts, each was number coded for school district, school, and student. Information was recorded from each regarding parents' names, addresses, and telephone numbers, and regarding school district/school names and telephone numbers. This information was committed to a confidential file that could be accessed only by a password. Records were then inspected page by page, and relevant identifying information was obscured with a mark-out pen. Records were kept in locked files and accessed only within the confines of the study area facilities. Nonauthorized personnel were excluded from this study area.

Extracting Information From Student Records

Information was extracted from M-team records by trained evaluators. After the information was recorded on the profile form, it was entered directly onto the Microsoft Access computer program.

Training the Evaluators

An experienced person was selected as evaluation team leader to conduct the training of record evaluators and to function as the reliability checker. This person had been a teacher of learning disabled students and a director of special education. Over 20 years, she had participated in and reviewed scores of M-team evaluations. During the last two years, she had functioned as an adjunct faculty member for the Department of Special Education at University of Wisconsin Oshkosh.

Training of two record evaluators commenced when the first records arrived from the school districts, and lasted for approximately two weeks. Training was discontinued and official record review began when the two record evaluators consistently achieved over 90% inter-rater agreement with their trainer, during their practice trials. These two record evaluators were graduate students within the Department of Special Education. During the last two weeks of the review process, as time goals approached, three additional evaluators were added to facilitate the completion of the record reviews. These three additional record evaluators were undergraduate students who had been assisting with other components of the data collection and tabulation; thus they were already familiar with the goals and procedures of the project and had demonstrated their competence in other tasks. They, too, were trained for approximately two weeks by the evaluation team leader and were only included in record evaluation when they achieved the 90% or greater inter-rater agreement criterion established for the initial record evaluators. To further facilitate completion of the record evaluations, the team leader moved from being a reliability checker to an initial record evaluator during the last two weeks of the record reviews. Her records were evaluated for inter-rater agreement by one of the original record evaluators who, by now, was consistently achieving an average of 97% on inter-rater agreement checks.

Inter-Rater Agreement

To verify objectivity in the record review process and to confirm consistent application of record review procedures over time, a 15% sample of all records reviewed was subjected to independent evaluation by a second evaluator. This sample was randomly selected using a table of random numbers and was differentially drawn for records that resulted in eligibility versus those resulting in ineligibility for LD services. Because ineligibility decisions were of greater importance than eligibility decisions to final conclusions regarding differences between Wisconsin and federal LD identification procedures, a 25% sample was selected from that pool of records to be independently evaluated, whereas a 10% sample was selected for independent review from the student records that produced recommendations for eligibility. Inter-rater agreement data was calculated for each record evaluator, for the sample of records recommending eligibility and for the sample of records indicating ineligibility for LD services. The average of inter-rater reliability for the 195 records is 93.4%; the average inter-rater reliability for the 135 ineligibility cases is 93.7%, and the average for the 60 eligibility cases is 92.7%.

Computer Program

Microsoft Access, a relational database system, was used to design the application program to manage the information accurately and efficiently. The LD eligibility database (named as "state.mdb") consists of 11 tables for storing related data. These tables are: District, School, Student, General Information, IQ Information, Achievement Information, Significant Discrepancy, Exclusionary Factors, Minority Report, Need for Special Education, and Red Flags. The field that makes up the primary key on each of these 11 tables, in order to set up the one-to-one relationship, is the 8-digit student ID number. The categories of information in these tables are called fields and are displayed as columns in the tables. The individual students in these tables are called records and are displayed as rows.

The LD eligibility database was customized to match the fields with the questions asked in the Student Profile Sheet or Protocol. The structure of the database is in identical sequence to the Profile Sheet and also incorporates the following design features:

1. In addition to validating automatically the values based on a field's data type, certain fields have built-in input masks to minimize data-entry errors. For instance, the referral date field will only accept, as valid input, three 2-digit numbers separated by two slashes (e.g. 10/15/94). New entries to the student ID field are accepted only when they contain combinations of eight characters (one letter and seven digits) that have not previously been stored in this field.

2. Default property was used to increase efficiency. For example, because it was anticipated that few students would have transferred into Wisconsin from other states, that field was preset by default as "No," unless the data entry person chose to overwrite it. Similarly, the entry to M-Team chairperson was defaulted as "School Psychologist."

3. To the extent possible, a pull-down menu with anticipated choices was used to allow the data entry person to click the choice instead of typing the response.

4. Fields that are not applicable because of responses to prior conditional statements are locked or disabled. For example, data cannot be entered regarding Question 48 on the Profile Sheet (i.e. If you answered "no" in number 47 above . . .), when the answer to Question 47 is "yes". Another example is that data regarding achievement areas which meet the significant discrepancy level cannot be entered into both the readiness and post-readiness columns (Profile Sheet Question 50).

In addition to the tables, the LD eligibility database can relate data in forms and queries, and can also be readily exported to other spreadsheets (e.g., Excel) or statistics software such as the Statistical Package for Social Sciences (SPSS). When the database was switched from "table" to "form," it offered a convenient layout for entering data; not only did it save time and prevent typing errors, but the record in "form" view resembles closely the Student Profile Sheet (A printed copy of the Form is included in Appendix K).

The real power of the LD eligibility database is in its ability to rapidly and easily retrieve information. With queries, questions can be asked about the data in the tables by specifying criteria regarding either the record or the field. In this project, queries have been used to select records, create tables, to find unmatched entries, and to delete entries. Additionally, data entries have been used as the basis for making graphs which illustrate quantitative results. Most importantly, once queries were created to select and sort information stored in the database, selected sets of records could be thoroughly reanalyzed to validate information or to reconcile differences relative to key research questions.

Verifying the Data

Three types of information were entered onto the profile forms. One type of information was straightforward and obvious; for example, a request for an IQ score. Another type of information required a degree of interpretation by the record evaluator, such as a response to the question, "How did the M-team determine the expected achievement level?" A third type of information required a statement of opinion by the evaluator; for example a response to the question, "Did the M-team conclude that this student was not eligible for placement solely because his/her functional achievement was more than 50% of expected achievement or less than 1-year delay?"

Most frequently, this latter type question was included to confirm information acquired through the query process. For example, early in the processes of data analysis, a series of queries was used to identify the number of students found ineligible for LD programs solely because intellectual functioning was judged to be less than normal, and the number of students found ineligible for LD programs solely because they had only one area of significant discrepancy. The outcomes of these queries were then checked against the evaluators' responses to question number 36, "Did the M-team conclude that this student was not eligible for LD placement solely because his/her IQ score was less than 90 or -1 *SD*" and to question number 57, "Did the M-team conclude that this student was not eligible for placement solely because he/she had only one area of significant discrepancy?" The specific student cases identified by the queries and the evaluators' responses to the opinion questions were identified, and the records of these cases were completely reviewed. Because the number of such records was small compared to the original 1124 records reviewed, a more complete and thorough analysis could thus be conducted. For a more complete description of this verification and review process, see Appendix L.

Additionally, previously unknown information could now be extracted from the records. For example, the reasons for ineligibility for more than 200 cases were still unknown after the initial series of queries had been conducted. These "unknown" cases were now pulled from the files and thoroughly reviewed, to delineate the probable reasons and combinations of reasons for ineligibility. Reviews such as these were conducted cooperatively by the two evaluators who had consistently achieved the highest percent agreements during inter-rater agreement checks.

Follow-up Telephone Interviews

Upon completion of record reviews, several potentially problematic areas became apparent from the data. These constituted practices related to evaluation and identification of LD students which, although not directly related to the key research questions for this study, nevertheless posed issues of concern. The primary such issue was in regard to the 50% cutoff point for academic achievement relative to expected achievement, which is expressed as a significant discrepancy by Wisconsin M-teams. Thorough and detailed data on the 50% issue was available as part of the larger data base for this study. That data was analyzed and is presented in this report.

Other issues, in addition to the 50% cutoff issue, also emerged for which data was not as available in the existing data base. Therefore, a follow-up procedure utilizing telephone contacts to particular districts, particular groups, or regarding particular cases, was developed. Specifically, the intent of the follow-up procedures was to further clarify issues regarding participation of regular education teachers at M-teams, determination by M-teams that a child does not need special education, attitudes toward Bond-Tinker and other discrepancy models, and attitudes of parents and suggestions for improvements to Wisconsin LD programs. Due to time constraints on the study, it was necessary to keep the number of telephone interviews low. Results of telephone follow-up, therefore, are not considered to be conclusive but only to indicate possible attitudes or trends for further follow-up at a later date.

Surveys

In addition to reviews of the records for Random Sample, Multiple Complaint, and Parent Nominated groups, a survey of the special education directors from the Random Sample and Multiple Complaint groups was completed. Surveys were also sent to a selection of parents and M-team members from these districts.

Directors of Special Education

Researchers and practitioners have hypothesized a number of variables which may relate to placement decisions that are made by M-teams. Frequently studied variables include race and gender of students (Barona & Faykus, 1992; Payette & Clarizio, 1994) and training in problem-solving strategies (Moecker, 1992). Interviews with school psychologists and learning disabilities teachers generated additional variables including size of school district, composition of M-team, background of M-team members, use of a standard battery to assess intelligence and achievement, use of building assistance teams to assist teachers in developing prereferral intervention strategies, and collaboration between regular and special education. To obtain information on these variables, as well as to gather information on research questions 2 and 4, a survey was developed for the special education directors of the districts involved in the study. The survey was distributed to the special education directors at a meeting on October 18, 1995, when the nature of the study was explained. Completed surveys were received from all 30 of the districts. A copy of the survey is included in Appendix M.

Other Professionals and Parents

To obtain additional information for research questions 2 and 4, an additional survey was developed and sent to relevant professional and parent organizations, as well as to random samples of participants in the M-team process for the 1124 students included in the study. This survey asked respondents to identify their role/position in the school setting and to answer these questions: (1) If a student meets the criteria for learning disabilities, how is it determined whether the child needs special education? and (2) What are your suggestions for improving Wisconsin LD eligibility criteria and identification procedures? Since some recipients of the survey were not familiar with Wisconsin's eligibility criteria and identification procedures, a summary of those regulations and copies of the actual PI 11.35 regulations were included with the survey. These materials along with the cover letter and survey are included in Appendix N.

The sample for this survey included 12 school board presidents (representing 2 low prevalence districts, 6 average prevalence districts, 2 high prevalence districts, and 2 Multiple Complaint districts), 52 principals, and 60 school psychologists. In addition, 60 student records were randomly selected from the total Random and Multiple Complaint samples of 1124 cases. Surveys were sent to M-team participants (including parents, parent advocates, classroom teachers, LD teachers, diagnostic teachers, counselors, physical and occupational therapy personnel, speech therapists, school social workers, school nurses, and school district administrators) in these 60 cases.

Completed surveys were received from 1 school board president, 11 principals, and 27 school psychologists, representing return rates of 8%, 21%, and 45% respectively. In addition, completed surveys were received from 5 classroom teachers, 13 LD teachers, 4 diagnostic teachers, 3 counselors, 1 special education designee, 1 school nurse, 5 speech and language specialists, and one university teacher. These individuals had participated in the M-team meetings for at least one of the 60 randomly selected cases.

RESULTS

Return Rates

Thirty-six school districts were asked to return student records and surveys. All 36 provided the information requested. Five additional districts were contacted to provide information concerning additional Parent Nominated subjects. Because these nominations were received very late, however, there was not sufficient time to review these records before this report was completed. However, these will be reviewed upon receipt, and an addendum regarding them will be distributed.

Districts were asked to submit records for all, or for a pre-identified group, of those students initially referred for LD during the 1994-1995 school year. One thousand one hundred thirty-seven student records were returned to the researchers. Although it is impossible to be certain that records for all students referred during 1994-1995 were sent to the researchers, there is no evidence that would indicate otherwise.

Demographic Information

Prevalence, referral, and placement rates were determined for districts in the Random Sample and Multiple Complaint samples. Eligibility rates by gender, by prior referral for LD, by out-of-state transfer status, by retention of grades, by parent attendance at M-teams, by referral source and by numbers of M-team participants were determined for both the Random Sample and Multiple Complaint districts.

Prevalence, Referral, and Eligibility Rates

Prevalence rates (the number of students in LD programs divided by the number of students within that school district) vary from district to district and, for the 1994-1995 school year, ranged from 2.48% to 8.00% for the 30 school districts within this study. The referral rate (the number of students referred in a school district divided by the total number of students in that district, including those in nonpublic schools), ranged from a low of .7% (7 students per 1000 students in the school district) to a high of 2.9% (29 students per 1000 students in the school district), across the 30 school districts in this study. The eligibility rate (the number of students placed in relation to the number referred in a given district) ranged from a low of 10% to a high of 100%, across the 30 districts of the study (See Table 5).

An analysis of these three rates provides clues that help to better understand the data. For example, the prevalence rate for the high prevalence districts group may be explained by that group also having the highest referral rate and the highest eligibility rate of all groups. Further, as might be expected, the mean of the average prevalence group is comparable to the mean of the 25 randomly selected districts: 4.52% vs. 4.45%. It is also comparable to the referral rate and eligibility rate of the Random group: 13 per 1000 vs. 12 per 1000, and 50.8% vs. 53.1%, respectively. The low prevalence group has results, however, that do not follow the pattern one might expect. Although the mean prevalence rate for this group is very low, 2.55%, its eligibility rate of 50.5% is unexpectedly close to that of the total randomly selected group (53.1%). The low prevalence group's mean referral rate is low, at 9 referrals per 1000 students, when compared to the mean prevalence rate of 12 referrals per 1000 students within all randomly selected districts.

The Multiple Complaint group had a prevalence rate of 3.47%, which was below the average of the 25 randomly selected districts, 4.45%; a referral rate, 13 per 1000 students, which was close to the average rate for the 25 randomly selected districts, 12 per 1000; and an eligibility rate of 46%, which is somewhat lower than the average for all randomly selected districts, 53.1%.

Characteristics of Random Sample Group

Out of the 687 students referred in 1994-1995 for suspected LD, 365 (53.1%) were found eligible, and 322 (46.9%) were found not eligible. Table 6 presents the crosstabulation of LD eligibility by gender. In this sample, male students were significantly more likely to be placed in LD than females ($\chi^2 = 7.09$, $df = 1$, $p = .007$). The eligibility rate of male students was 56.9% versus the rate of 46.3% for females.

This data is consistent with data from other studies which have examined eligibility rates for students referred for learning disabilities evaluations. Eligibility rates in other studies have ranged from 52% for a sample of Hawaiian students (Furlong & Yanagida, 1985); to 58% in midwestern urban and rural school districts (Payette, Clarizio, Phillips & Bennet, 1995); to 61% for a California sample (Furlong, 1988); to 65% in a sample of referrals from Georgia (Dangel & Ensminger, 1986). In one recent study (Fugate, Clarizio, & Phillips, 1993), using a sample of 236 students who had been referred for initial LD evaluation, the researchers found that 54% of the students were determined eligible for LD services. The eligibility rates for male students in this study was 57% (90/158 referrals) and 49% for female students (38/78 referrals).

Table 5

Prevalence Rate--Referral Rate--Placement Rate By District 1994-1995

Group District	Prevalence Rate*	Referral Rate**	Eligibility Rate***
All Random Districts (Mean)	**4.447%**	**1.2%**	**53.1%**
Low Prevalence Districts (Mean)	**2.550%**	**0.9%**	**50.5%**
A01	2.568%	0.9%	54.55%
A02	2.914%	1.8%	57.69%
A03	2.604%	1.2%	55.26%
A04****	2.477%	0.7%	31.82%
Average Prevalence Districts (Mean)	**4.517%**	**1.3%**	**50.8%**
B01	4.974%	1.6%	83.33%
B02	6.424%	1.5%	57.14%
B03	4.744%	2.5%	53.85%
B04	3.146%	1.4%	10%
B05	5.017%	0.8%	42.86%
B06	4.255%	1.2%	72.73%
B07	4.633%	1.4%	100%
B08	3.498%	1.8%	38.10%
B09	5.530%	1.3%	41.18%
B10	5.450%	1.2%	45.83%
B11	4.436%	1.1%	66.67%
B12	3.693%	1.9%	38%
B13	4.336%	1.2%	66.67%
B14	5.201%	1.6%	63.27%
B15	5.653%	1.3%	46.67%
B16	3.319%	1.6%	32.81%
B17****	4.441%	0.8%	53.41%
High Prevalence Districts (Mean)	**7.265%**	**1.8%**	**66.3%**
C01	6.918%	1.7%	37.50%
C02	8.000%	2.9%	73.68%
C03	6.611%	1.4%	45%
C04	7.398%	1.5%	86.67%
Multiple Complaint District (Mean)	**3.465%**	**1.3%**	**46%**
D01****	4.088%	1.1%	65.22%
D02****	3.243%	1.2%	54.01%
D03	3.209%	1.0%	50%
D04	6.514%	2.9%	35.92%
D05	4.594%	0.2%	33.87%

* Number of students in LD programs divided by number of students in the school district. Consistent with other data in this table prevalence rates indicated are for the 1994-1995 school year only. Otherwise, all prevalence rates identified throughout this report represent prevalence rates calculated for three school years, i.e., 1992-1993, 1993-1994, and 1994-1995.

**Referral rate is referrals divided by number of students in the school district.

***Placement rate is number placed divided by total referred within this 1994-1995 study group.

****School districts with 9,500 or more student population

Table 7 presents the crosstabulation of LD eligibility and prior referral for LD. One hundred seventy-two (25%) of the currently referred students had also been referred previously. As can be seen in Table 7, 97 (56.4%) of students who had previously been referred for LD were now found eligible for LD services, whereas 75 (43.6%) were found not eligible. The eligibility rate for students who had previously been referred was slightly higher than the 52% rate for first time referrals ($\chi^2 = .98$, $df = 1$, $p > .05$).

Table 6

LD Eligibility by Gender for the Random Sample Group

	Ineligible	Eligible	Total
Female	**132**	**114**	**246**
	53.7%	46.3%	35.8%
Male	**190**	**251**	**441**
	43.1%	56.9%	64.2%
Total	**322**	**365**	**687**
	46.9%	53.1%	100%

Table 7

LD Eligibility by Prior Referral for the Random Sample Group

	Ineligible	Eligible	Total
No Prior Referral	**247**	**268**	**515**
	48.0%	52.0%	75.0%
Prior Referral	**75**	**97**	**172**
	43.6%	56.4%	25.0%
Total	**322**	**365**	**687**
	46.9%	53.1%	100%

Table 8 presents the crosstabulation of LD eligibility and out-of-state transfers. Forty-seven (6.8%) students in this sample group transferred into Wisconsin from other states. Thirty of these students (63.8%) were found eligible for LD services, whereas 17 (36.2%) were found ineligible for LD programs. The eligibility rate of 63.8% for transfer students is not significantly different from the rate of 52.3% for non-transfer students ($\chi^2 = 2.34$, $df = 1$, $p > .05$).

The data in Table 9 shows that 106 students (15.4%) had been retained at least once. Sixty-one of these students were found eligible for LD services. This eligibility rate (57.5%) is not significantly different from those who did not repeat grades (52.3%) ($\chi^2 = .98$, $df = 1$, $p > .05$).

Table 8

LD Eligibility by Students Transferred from Out-of-State for the Random Sample Group

	Ineligible	Eligible	Total
Non-Transfer Students	**305** 47.7%	**335** 52.3%	**640** 93.2%
Transfer Students	**17** 36.2%	**30** 63.8%	**47** 6.8%
Total	**322** 46.9%	**365** 53.1%	**687** 100%

Table 9

LD Eligibility by Retention for the Random Sample Group

	Ineligible	Eligible	Total
Not Retained	**277** 47.7%	**304** 52.3%	**581** 84.6%
Retained	**45** 42.5%	**61** 57.5%	**106** 15.4%
Total	**322** 46.9%	**365** 53.1%	**687** 100%

Table 10 presents the crosstabulation of LD eligibility by parent attendance at M-teams. No parents attended 27.2% of the M-teams within the Random group. The eligibility rate of

56.7%, when parents were absent, was not significantly different from the rate of 51.8% when parents were present ($\chi^2 = 1.30$, $df = 1$, $p > .05$).

Table 10

LD Eligibility by Parent Attendance at M-teams for the Random Sample Group

	Ineligible	Eligible	Total
Parent Absent	**81** 43.3%	**106** 56.7%	**187** 27.2%
Parent Present	**241** 48.2%	**259** 51.8%	**500** 72.8%
Total	**322** 46.9%	**365** 53.1%	**687** 100%

Table 11 presents the crosstabulation of LD eligibility by the referral source. Classroom teachers were the largest referring group, accounting for 62.0% of the students referred. Parent referrals (11.1%) ranked second. It is noteworthy that the LD eligibility rate of 58.20%, when classroom teachers were the referral source, was significantly higher than the rate of 34.2% when parents were the referral source ($\chi^2 = 14.98$, $df = 1$, $p < .001$). For information related to referrals from other sources, for the Random Sample group, see Table 11.

The data in Table 12 indicates the number of M-team members. On the average, 5.83 individuals attended M-teams (*SD* = 1.68). The total number of participants ranges from 1 to 14.

Responses from the survey of special education directors (See Appendix M) indicated that the typical M-team consisted of the classroom teacher, LD teacher, school psychologist, and parents at the elementary, middle school, and high school levels. Counselors and principals were also frequently involved in M-teams (21% to 57% of the time).

Table 11

LD Eligibility by Referral Source for the Random Sample Group

Referral Source	Ineligible	Eligible	Total
Classroom Teacher	**178** 41.8%	**248** 58.2%	**426** 62.0%
Parent	**50** 65.8%	**26** 34.2%	**76** 11.1%
Other	**26** 41.9%	**36** 58.1%	**62** 9%
Parent and Teacher	**21** 65.6%	**11** 34.4%	**32** 4.7
School Psychologist	**13** 41.9%	**18** 58.1%	**31** 4.5%
Counselor	**18** 62.1%	**11** 37.9%	**29** 4.2%
Multiple Staff	**8** 50%	**8** 50%	**16** 2.3%
LD Teacher	**4** 36.4%	**7** 63.6%	**11** 1.6%
Parent and Psychologist	**4** 100%		**4** .6%
Total	**322** 46.9%	**365** 53.1%	**687** 100%

Table 12

Frequency Table of M-team Participants for the Random Sample Group

M-team Size	Frequency	Percent
1	1	.1
2	5	.7
3	28	4.1
4	111	16.2
5	171	24.9
6	160	23.3
7	107	15.6
8	61	8.9
9	27	3.9
10	8	1.2
11	5	.7
12	2	.7
14	1	.1
Total	687	100

Average: 5.83 participants
Standard Deviation: 1.68

Wisconsin Results Compared With Results from Colorado, Indiana, and Iowa

Similar studies of LD referral and placement practices were conducted in Colorado (Shepard & Smith, 1983), Indiana (McLesky & Waldron, 1990), and Iowa (Kavale & Reese, 1992). Although each of these studies addressed somewhat different issues, some results may be compared across states. Results, in particular those from Iowa and Indiana, may also be compared with results determined in this study, regarding practices in Wisconsin (See Table 13). It must be remembered when making such a comparison, however, that data from other studies was developed 6 to 12 years earlier than the data from this current study.

Referral information may be compared for the four states mentioned. The regular classroom teacher is the most frequent source of referral in three of these states. In Wisconsin, as indicated in results of this current study, 62% of LD referrals originate with the classroom teacher, whereas in Colorado the classroom teacher makes the referral 76% of the time and, in Iowa, the classroom teacher makes the referral 74% of the time.

In Wisconsin, Colorado, and Iowa, the parent is the second most frequent source of referrals. According to this current study, the parent constitutes the referral source 11% of the time, whereas in Colorado the parent referred 8% of the time, and in Iowa the parent made 9% of the LD referrals.

Referral rates by gender, proportions placed by gender, and the grade levels at which students are most frequently found eligible for LD may be compared across Wisconsin, Indiana, and Iowa. In Wisconsin, the proportion of male students in LD programs is 69%, with females constituting 31% of LD placements. In Iowa, the proportion of males to females in LD programs is 70% vs. 30%; and in Indiana the proportion is 75% vs. 25%. Students are most frequently referred for LD at 8 years of age, in both Wisconsin and Indiana. Grade in school at the time of referral is most frequently the first grade, in Wisconsin and Indiana. Percentages of LD evaluations, by grade level, may be compared for Wisconsin and Iowa. In Wisconsin, per this current study, 12.6% of evaluations occur at the preschool level, whereas in Iowa 9% of evaluations occur at the preschool level. In Wisconsin, 16.9% of evaluations for LD occur at the first grade, 16% occur at the second grade, 13.8% occur at the third grade, 7.6% at the fourth grade, and 7.6% of evaluations occur at a child's fifth grade level. Corresponding percentages for Iowa are 21% at the first grade level, 21% at the second grade, 17% at the third grade, 12% at the fourth grade, and 7% at a child's fifth grade level in school. Contrasting the proportions of elementary to secondary level students who are found eligible for LD services, in Wisconsin the proportion of elementary to secondary students in LD programs is 81.6% vs. 18.4%. In Iowa, 49% of students are found eligible at the elementary level, and 51% are found eligible at the secondary level.

Information regarding intelligence testing is also comparable across states. The Wechsler tests are the most frequently used tests of intelligence in Wisconsin (79.9%), Iowa (93%), and Indiana (88%). The Stanford Binet is used 8.9% of the time in Wisconsin, 7% of the time in Iowa, and 9% of the time in Indiana. The mean IQ full-scale score for students found eligible for LD is 92.2 in Wisconsin, 96.49 in Iowa, and 93.8 in Indiana.

The most frequently used achievement test in Wisconsin is the Woodcock-Johnson PsychoEducational Battery (68%) whereas, in Indiana, the Wide Range Achievement Test is the most frequently used (57%), followed by the Woodcock-Johnson PsychoEducational Battery (45%). The second most frequently used test in Wisconsin is the Peabody Individual Achievement Test, which is used 28% of the time. The Wide Range Achievement Test is used in Wisconsin 24% of the time.

M-team participation may be compared across Wisconsin, Colorado, and Iowa. The mean number of M-team participants in Wisconsin is 6, whereas in Colorado that mean is 7 or 8. Comparison of participation at M-teams is available for Wisconsin and Iowa. School psychologists participate at M-teams 97% of the time in Wisconsin, and 90% of the time in Iowa. The regular education teacher participates 86% of the time in Wisconsin and 76% of the time in Iowa. The special education teacher participates in M-teams 85% of the time in Wisconsin versus 73% in Iowa; and the principal participates 17% of the time in Wisconsin, but 72% of the time in Iowa. Information regarding parent participation is reported in Iowa as participation by the student's mother. In Iowa, the mother was reported to be present at M-teams 80% of the time. Parents, according to data for this current study, are present at M-teams in Wisconsin 73% of the time.

Table 13

A Four State Comparison

Category	Colorado	Indiana	Iowa	Wisconsin
Who Made Referral				
Classroom Teacher	76%		74%	62%
Parent	8%		9%	11%
Proportion Referred: Males		67%		64%
Proportion Referred: Females		33%		36%
Proportion Eligible: Males		75%	70%	69%
Proportion Eligible: Females		25%	30%	31%
Most Frequent Age Referred		8 yrs		8 yrs.
Most Frequent Grade Referred		1st.		1st.
Grade Level at Staffing				
Preschool			9%	12.6%
1			21%	16.9%
2			21%	16%
3			17%	13.8%
4			12%	7.6%
5			7%	7.6%
Placed Elementary			49%	81.6%
Placed Secondary			51%	18.4%
IQ Tests				
Wechsler Tests Used		88%	93%	79.9%
Full-Scale Score as Estimate Ability		90%		
Verbal Scale as Estimate Ability		6%		
Performance Scale as Estimate Ability		4%		
Stanford Binet Used		9%	7%	8.9%
Mean IQ LD Students Full-Scale		93.8	96.49	92.2
Achievement Tests				
Wide Range Achievement Test Used		57%		24%
Woodcock-Johnson Psy. Bat. Used		45%		68%
Basic Ach. Skills Ind. Screen. Used		15%		----
Kaufman Test of Ed. Ach. Used		10%		15%
Peabody Ind. Ach. Test Used		7%		28%
How Many Tests	6-7			
Deficiency Area				
Reading		87%	66%	26%
Written Expression		80%	25%	28%
Math		64%	35%	10%
Language			17%	
Spelling			16%	23%
Study skills			12%	
Subject areas			12%	
Readiness			10%	
Participation at M-teams				
Number of M-team participants	7-8			6
Psychologist			90%	97%
Parent (Mother)			80%	73%
Regular Education Teacher			76%	86%
Special Education Teacher			73%	85%
Principal			72%	17%

Characteristics of Multiple Complaint Group

Multiple Complaint school districts were not part of the Random Sample for this study. Rather, these districts were selected by DPI for inclusion in the study, because more than one parent complaint had been registered from each regarding LD services.

Out of the 437 students referred in 1994-1995 for suspected LD from the Multiple Complaint group, 201 (46%) were found eligible and 236 (54%) were found not eligible for LD services. Table 14 presents the crosstabulation of LD eligibility by gender. In this sample, the eligibility rate for male students was 47.0% versus the rate of 44.4% for females.

Table 14

LD Eligibility by Gender for the Multiple Complaint Group

	Ineligible	Eligible	Total
Female	**95**	**76**	**171**
	55.6%	44.4%	39.1%
Male	**141**	**125**	**266**
	53.0%	47.0%	60.9%
Total	**236**	**201**	**437**
	54.0%	46.0%	100%

Table 15 presents the crosstabulation of LD eligibility and prior referral for LD. Ninety-eight (22.4%) of the currently referred students had been referred previously. The eligibility rate for previously referred students (50%) is not significantly different from the 44.8% eligibility rate for first time referrals ($\chi^2 = .27$, $df = 1$, $p > .05$).

Table 16 presents the crosstabulation of LD eligibility and out-of-state transfers. Of the 32 (7.3%) students who transferred into Wisconsin in 1994-1995, 17 of them were found eligible in Wisconsin, whereas 15 were found ineligible for Wisconsin's LD programs. The eligibility rate of 53.1% for out-of-state transfer students is not significantly different from that of 45.4% for the non-transfer students in the Multiple Complaint group ($\chi^2 = .706$, $df = 1$, $p > .05$).

Table 15

LD Eligibility by Prior Referral for the Multiple Complaint Group

	Ineligible	Eligible	Total
No Prior Referral	**187** 55.2%	**152** 44.8%	**339** 77.6%
Prior Referral	**49** 50.0%	**49** 50.0%	**98** 22.4%
Total	**236** 54.0%	**201** 46.0%	**437** 100%

Table 16

LD Eligibility of Students Transferred from Out-of-State for the Multiple Complaint Group

	Ineligible	Eligible	Total
Non-Transfer Students	**221** 54.6%	**184** 45.4%	**405** 92.7%
Transfer Students	**15** 46.9%	**17** 53.1%	**32** 7.3%
Total	**236** 54.0%	**201** 46.0%	**437** 100%

The data in Table 17 shows that 87 students (19.9) had been retained at least once. Fifty (57.5%) of these students were offered LD services. This rate is significantly higher than the 43.1% eligibility rate for those who did not repeat grades ($\chi^2 = 5.76$, $df = 1$, $p = .01$).

Table 17

LD Eligibility by Retention for the Multiple Complaint Group

	Ineligible	Eligible	Total
Not Retained	**199**	**151**	**350**
	56.9%	43.1%	80.1%
Retained	**37**	**50**	**87**
	42.5%	57.5%	19.9%
Total	**236**	**201**	**437**
	54.0%	46.0%	100%

Table 18 presents the crosstabulation of LD eligibility by parent attendance at M-teams. Overall, there were 103 (23.6%) M-teams with no parents attending. The eligibility rate of 56.3% when parents were absent is significantly higher than the rate of 42.8% when parents were present ($\chi^2 = 5.77$, $df = 1$, $p = .016$).

Table 18

LD Eligibility by Parent Attendance at M-teams for the Multiple Complaint Group

	Ineligible	Eligible	Total
Parent Absent	**45**	**58**	**103**
	43.7%	56.3%	23.6%
Parent Present	**191**	**143**	**334**
	57.2%	42.8%	76.4%
Total	**236**	**201**	**437**
	54.0%	46.0%	100%

Table 19 presents the crosstabulation of LD eligibility by the referral source. Classroom teachers constituted the largest referral source, making 229 (52.4%) of the referrals. Parents constituted the second largest source of referrals, accounting for 92 (21.1%) of referrals in the Multiple Complaint school district group. There is no significant difference in eligibility rate between those referred by classroom teachers and those referred by parents ($\chi^2 = 2.32$, $df = 1$, $p > .05$).

Table 19

LD Eligibility by Referral Source for the Multiple Complaint Group

Referral Source	Ineligible	Eligible	Total
Classroom Teacher	**123** 53.7%	**106** 46.3%	**229** 52.4%
Parent	**58** 63.0%	**34** 37.0%	**92** 21.1%
School Psychologist	**13** 35.1%	**24** 64.9%	**37** 8.5%
Other	**13** 48.1%	**14** 51.9%	**27** 6.2%
Parent and Teacher	**15** 71.4%	**6** 28.6%	**21** 4.8%
Counselor	**7** 50.0%	**71** 50.0%	**14** 3.2%
Multiple Staff	**5** 35.7%	**9** 64.3%	**14** 3.2%
Parent and Psychologist	**2** 66.7%	**1** 33.3%	**3** .7%
Total	**236** 54.0%	**201** 46.0%	**437** 100%

School psychologists ranked only third (8.5%) as the source of referrals, but the eligibility rate (64.9%) for students referred by school psychologists is higher than for those from other referral sources. In contrast, the eligibility rate for students referred by classroom teachers is 46.3%, and the eligibility rate for students referred by their parents is only 37%. A significant difference in eligibility rates is revealed when those students referred by parents are compared with those referred by school psychologists (64.9%) ($\chi^2 = 8.29$, $df = 1$, $p < .01$).

The data in Table 20 indicates the number of M-team members. On the average, 5.98 individuals attended M-teams (*SD* = 1.88). The total number of participants ranged from 2 to 14.

Table 20

Frequency Table of M-team Participants for the Multiple Complaint Group

M-team Size	Frequency	Percent
2	2	.5
3	31	7.1
4	63	14.4
5	94	21.5
6	87	19.9
7	87	19.9
8	34	7.8
9	18	4.1
10	10	2.3
11	7	1.6
12	3	.7
14	1	.2
Total	437	100

Characteristics of Parent Nominated Group

Thirteen parent nominated cases were received on time for records to be evaluated and results to be included in this report. Seven more parent nominations were received too late for results to be included in this report. Of the 13 cases, 2 did not involve referrals for learning disabilities. One of these consisted of an initial referral for Emotional Disturbance (ED) followed by a referral for Other Health Impairments. The second consisted of an individualized education plan (IEP) issue rather than a placement issue. Information regarding these two cases is considered to be outside the scope of this study.

Of the 11 remaining Parent Nominated cases, 8 were for male students and 3 were for female students. Ages of these students ranged from 6 to 17 years, at the time of referral(s); and grades ranged from K-11. In six of the cases, a parent had made the referral; in one case, the school psychologist had made the referral; in three cases, the referral had been made by a classroom teacher; and in one case, a medical clinic was the referral source. Four of these students had previously been referred for a learning disabilities evaluation. None of these students was found eligible for learning disabilities by the M-team; and, in all 11 cases, that determination of ineligibility was a unanimous decision by M-team members.

None of the 11 students among the Parent Nominated cases was found ineligible for learning disabilities programs solely on the basis of having all IQ scores below 90. One student was found ineligible due solely to having only a single area of significant discrepancy. Five were determined ineligible because they had no academic area low enough to reach the cutoff point (50%) which constitutes a significant discrepancy in Wisconsin.

Four of the remaining five students were found ineligible for LD for various combinations of reasons. For three students, although they were not ineligible solely on the basis of IQ, IQ nevertheless influenced the decision in that it depressed the achievement level which constituted significant discrepancy; thus, for three students, low IQ and the lack of any significant discrepancies constituted combined reasons for ineligibility. One of these three students, however, was found eligible for ED services. A fourth child was found ineligible due to a combination of no significant discrepancies and no in-child variability. For the last of the 11 Parent Nominated cases, the evaluator was unable to discern the reason for ineligibility, due to unclear documentation in the records.

Lack of significant discrepancies contributed at least partially, then, to the M-teams' judgment of ineligibility in each of the 10 Parent Nominated cases, in which the reason for ineligibility could be discerned by the records evaluator. In four of these cases, the student had one area of discrepancy very close to 50% (46%, 42%, 48%, 41%). In one case, the student had two areas very close to the 50% (46%, 44%) significant discrepancy level. Finally, in the case where the reason for ineligibility could not be discerned by the records evaluator (a preschool case), the student appeared to have three scores which reached the discrepancy level required for LD eligibility at the preschool level.

As a result of these referrals, two of the students in the Parent Nominated group were offered other special education services. One, the student ineligible for LD due to having just one area of significant discrepancy, was offered ED services, but these were refused by the parent. The other, a student ineligible for LD due to having no in-child variability and no significant discrepancies, was offered services in a Speech and Language program. Three others were offered special services in regular education (one Co-op placement and two 504 placements). In addition, recommendations were made for continuation of existing services for three students, one in ED, one in an At Risk Program, and one in Specially Designed Physical Education (SDPE). Of these continued services, the ED and SDPE programs are in special education; as mentioned above, the At Risk program is a regular education offering.

Random Sample Group: Areas of Contention

OSEP has identified two areas of concern related to Wisconsin's identification practices. These are: students declared ineligible solely because IQ scores are below 90 and students ineligible solely because there is a single area of significant discrepancy. Of the 322 students in the Random Sample group who were found to be ineligible for LD services, 10 were found ineligible solely because all IQ scores were below 90; 15 were found ineligible due solely to a single area of discrepancy; and 2 were ineligible due to the combination of these two factors--that is, to having all IQ scores below 90 in combination with a single area of significant discrepancy.

IQ Scores Below 90

Students who were ineligible for LD services solely on the basis of IQ scores below 90 are identified by subcategories of the Random Sample and discussed below.

IQ Scores Below 90 as the Only Reason for Ineligibility

Ten students in the Random Sample group were declared ineligible for LD programs solely because their IQ scores were below 90 on a multiple score test. These 10 students represent 3.1% of the 322 students from the Random group who were declared ineligible for LD services (See Table 21).

The Random group was separated into subgroups according to prevalence rate and size of school district. As previously indicated, prevalence rate represents the proportion of students within a school district identified in LD programs divided by the total number of students in that school district (See Random Sample, pp. 27-28, for a discussion of how prevalence rates were determined for school districts). Size of district is differentiated by large schools with 9,500 or more students in the district, and small/medium school districts which contained fewer than 9,500 students.

Forty-eight students in the low prevalence Random group, 239 students in the average prevalence Random group, and 35 students in the high prevalence Random group were, for various reasons, declared ineligible for LD programs. Of the ten students in the Random Sample group who were declared ineligible for the sole reason of IQ scores below 90, four were within the low prevalence group of students (8.3%), five were within the average prevalence group of students (2.1%), and one was within the high prevalence group of students (2.9%).

Table 21

Below Average IQ

A Comparison Between Students Found Ineligible and Eligible

	Incidence of Below Average IQ as the Only Reason for Ineligibility		Eligible Despite the Single Reason of all IQ Scores Below 90			
Group	**Ineligible**	**Percentage**	**Eligible**	**Percentage**	χ^2	p
Overall	22/569	3.9%	37/566	6.5%		
Random Sample Total	10/322	3.1%	26/365	7.1%	5.56	$<.05$
Low Prevalence	4/48	8.3%	7/49	14.3%		
Average Prevalence	5/239	2.1%	14/247	5.7%		
High Prevalence	1/35	2.9%	5/69	7.2%		
Large District	1/56	1.8%	1/54	1.9%		
Small/Medium District	9/266	3.4%	25/311	8%		
Multiple Complaint	12/236	5.1%	11/201	5.5%	.03	$>.10$
Parent Nominated	0/11	0%				

A reconfiguration of the Random group data, by school district size, reveals a difference between large districts and small/medium size districts taken as a group. Of the 56 students in the large district sample, only one student (1.8%) was declared ineligible for services solely because of IQ scores below 90; whereas nine of 266 (3.4%) students in the small/medium size districts were declared ineligible for services on the same basis of IQ scores below 90.

The Scope of IQ Scores Below 90 as the Only Reason for Ineligibility

It is necessary to determine whether students in the 10 cases identified above, who were found ineligible for LD services because of IQ reasons alone, are representative of practices found generally within the Random Sample group, or even if they are representative of practices in particular subgroups of randomly selected districts. To make these determinations, the data from each prevalence and school size subgroup was studied to determine the frequency of three contested practices. These are: IQ scores below 90 as the sole reason for ineligibility, a single area of significant discrepancy as the sole reason for ineligibility, and a combination of these two as reasons for ineligibility. Furthermore, when subgroups and/or individual districts were found to have used these contested practices, their records were reanalyzed to determine the extent to which flexibility may have been used in applying the same criteria. For example, if a subgroup or district declared five students with all IQ scores below 90 to be ineligible for LD services, but also identified five other students with all IQ scores below 90 to be eligible, this would indicate inconsistency of practice, but it might also indicate flexibility in applying, or perhaps even in ignoring, the IQ criterion.

Eligibility versus ineligibility when all IQ scores are below 90. Of the 322 students in the Random Sample who were found ineligible for LD services, 10 students (3.1%) were ineligible because all IQ scores (full-scale, verbal scale, and performance scale) were below 90 (See Table 21). However, 7.1% (26/365) students from the Random Sample group were found eligible for LD programs, despite having all IQ scores below 90 (See Table 21). A chi square analysis reveals a significant difference between those ineligible versus eligible ($\chi^2 = 5.56$, $df = 1$, $p < .05$).

Similar to the overall Random Sample, M-teams in most of the subgroups within that sample also found a higher proportion of students eligible for LD services, in spite of having all IQ scores below 90, than they found ineligible because of low IQ. Because of small numbers, statistical analyses were not conducted for subgroups.

Of the 48 students in the low prevalence group who were ineligible for LD services, 4 students (8.3%) were ineligible for the sole reason of all IQ scores below 90. Conversely, however, of the 49 in this group who were eligible for LD services, 7 (14.3%) were eligible despite having all IQ scores below 90. A similar outcome occurred in the average prevalence group, where 5 out of 239 students (2.1%) were ineligible for LD services, versus 14 out of 247 students (5.7%) who were eligible. In the high prevalence group, 1 student out of 35 (2.9%) was declared ineligible for the sole reason of IQ scores below 90, versus 5 out of 69 students (7.2%) who were eligible despite IQ scores below 90.

Only for the large school districts does another relationship between eligibility and ineligibility exist. In large school districts, one student out of 56 (1.8%) was declared ineligible for services based on below 90 IQ only; and one student out of 54 (1.9%) was declared eligible despite having all IQ scores below 90. Small/medium districts produced a ratio of eligibility to ineligibility more indicative of the total Random Sample group. That is, 25 students out of 311 (8%) having all IQ sçores below 90 were found to be eligible for LD services; and 9 students out of 266 (3.4%) were declared ineligible for services. When the practices of individual school districts from within the Random Sample are evaluated regarding application of the IQ criterion, outcomes are similar to the outcomes described for the subgroups above. That is, districts in which LD eligibility has been restricted based on all IQ scores below 90 are the same, with one exception, as those in which students with all IQ scores below 90 have been placed. Of the 26 (7.1%) cases in which students have been recommended as eligible for LD services, despite having all IQ scores below 90, all occurred within seven of the eight school districts where, one or more times, students had also been found ineligible for LD services solely because all IQ scores were below 90 (See Tables 22 and 23).

Specifically, the ineligible versus eligible incidence for each school district (represented by a letter and two digits) is as follows (See Tables 22 and 23). In each case the first number in parentheses represents the number of students found ineligible, and the second number represents the number of students found eligible for LD services: low prevalence school districts A02 (1-2), A03 (2-4), A04 (1-1); the average prevalence school districts B12 (1-3), B14 (1-2), B15 (1-9), B16 (2-0); and the high prevalence school districts C02 (1-5) (See Appendix O for an interpretation of code numbers).

Table 22

Incidence of Below Average IQ as only Reason for Ineligibility (*n* = 22)

Group	**Students**			**Incidence Rate**	**Percent**
Random Sample Total (*n* = 322)				10/322	3.1%
Low Prevalence Districts (*n* = 48)	A0203017 A0305027	A0306030	A0402023	4/48	8.3%
Average Prevalence Districts (*n* = 239)	B1205040 B1403017	B1501040 B1604007	B1606045	5/239	2.1%
High Prevalence Districts (*n* = 35)	C0201027			1/35	2.9%
Large Districts (*n* = 56)	A0402023			1/56	1.8%
Small/Medium Districts (*n* = 266)	A0203017 A0305027 A0306030	B1205040 B1403017 B1501040	B1604007 B1606045 C0201027	9/266	3.4%
Multiple Complaint Districts (*n* = 236)	D0201001 D0201080 D0204061 D0205141	D0211134 D0212058 D0212124 D0215126	D0217144 D0405121 D0406112 D0409037	12/236	5.1%
Parent Nominated Districts (*n* = 11)				0/11	0%

Comparing eligibility versus ineligibility for IQ score ranges. Another way to review the impact of IQ scores upon eligibility is by comparing eligibility decisions for ranges of IQ scores. Of particular interest are eligibility determinations in immediate proximity of the 90 IQ.

Table 23

Eligibility Despite the Single Reason of All IQ Scores Below 90 (*n* = 37)

Group	Students			Incidence Rate	Percent
Random Sample Total (*n* = 365)				26/365	7.12%
Low Prevalence Districts (*n* = 49)	A0201002 A0201012 A0302002	A0302039 A0303006	A0303036 A0404013	7/49	14.29%
Average Prevalence Districts (*n* = 247)	B1201001 B1202028 B1204009 B1405047 B1407045	B1501001 B1501003 B1504010 B1505025 B1505029	B1501019 B1501031 B1502021 B1507015	14/247	5.67%
High Prevalence Districts (*n* = 69)	C0201015 C0201030	C0203006 C0204012	C0204023	5/69	7.25%
Large Districts (*n* = 54)	A0404013			1/54	1.85%
Small/Medium Districts (*n* = 311)	A0201002 A0201012 A0302002 A0302039 A0303006 A0303036 B1201001 B1202028 B1204009	B1405047 B1407045 B1501001 B1501003 B1504010 B1505025 B1505029 B1501019	B1501031 B1502021 B1507015 C0201015 C0201030 C0203006 C0204012 C0204023	25/311	8.04%
Multiple Complaint Districts (*n* = 201)	D0202007 D0202075 D0202130 D0212062	D0215054 D0216151 D0221087 D0401003	D0406023 D0406134 D0410077	11/201	5.47%
Parent Nominated Districts (*n* = 11)				0/11	0%

When students are grouped within narrow ranges by full-scale IQ score, and then categorized by the M-team's determination of eligibility versus ineligibility for services, a comparison can be made to determine opportunity for services by IQ range (See Figure 1). Forty-nine percent of the students with a 100 or higher IQ score were deemed eligible for LD services. This compares to the average eligibility rate of 53.1% for all Random Sample subjects in this study. Fifty-five percent of the students with full-scale scores between 95 and 99 were found to be eligible, as were 65% of the students with full-scale scores between 90 and 94, 54% of the students between 85 and 89, 53% of students between 80 and 84, 43% of the students between 75 and 79, and 47% of the students between 70 and 74 full-scale IQ.

Another view of this same information is obtained when IQ categorization is by the highest achieved IQ score rather than by the full-scale IQ. In this procedure, the IQ score selected is the highest score obtained on a multiple scale test, and/or the highest score obtained if more than one test was administered during 1994-1995, or recorded from an earlier testing date. That highest of all scores is assumed to represent the student's intellectual ability. Because this provides the most optimistic representation of the student's level of intellectual function, a tendency exists for frequencies to shift upward by category when compared to an analysis using full-scale scores. For example, if a student's full-scale IQ score is 86, that student would place within the 85-89 IQ range of full-scale scores. However, if that same student's highest score is a performance scale score of 93, the student would shift up to the 90-94 range, based on that highest score. Using this procedure, no student would shift downward. The results of such analysis, in this study, would provide an eligibility rate of 53% for IQ scores 100 or higher, 61% for IQ scores 95-99, 56% for scores 90-94, 52% for scores 85-89, 29% for scores 80-84, and 44% for scores 75-79 (See Figure 2).

Figure 1

Full-Scale IQ Scores by LD Eligibility for the Random Sample Group

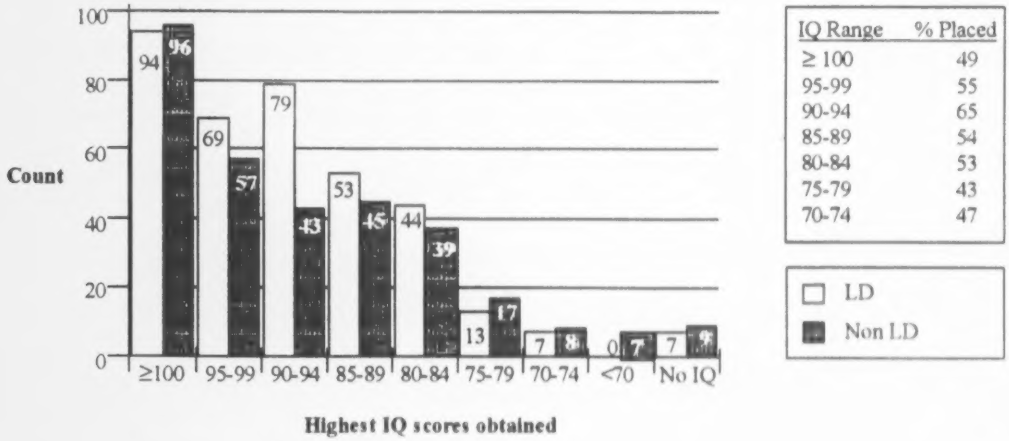
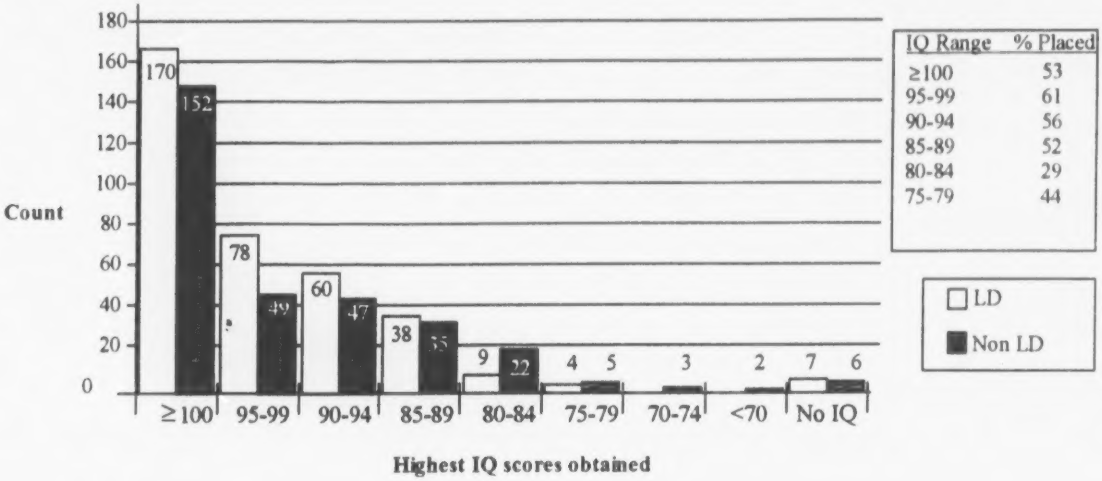


Figure 2

Highest Achieved IQ Score (Full-Scale, Verbal Scale, or Performance Scale) by LD Eligibility for the Random Sample Group



Comparing full-scale eligibility data with that from Iowa. A report describing Iowa's placement practices was published by Kavale and Reese (1992). Among other conclusions, Kavale and Reese determined that 14% of the students they studied had been placed in LD classrooms with full-scale IQ scores below 86. This compares to 20.82% of the students in this current study from the Random Sample group who were found eligible for learning disability services (See Appendix P).

A Single Area of Significant Discrepancy

Students who were declared ineligible for services solely on the basis of having only one area of significant discrepancy are identified by subcategories of the Random Sample and discussed below.

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A Single Area of Significant Discrepancy as Only Reason for Ineligibility

Fifteen students in the Random Sample group were declared ineligible for LD services, because they showed a significant discrepancy between expected achievement and actual achievement in only one area. These 15 students represent 4.7% of the 322 students from the Random group who were, for various reasons, declared ineligible for LD services (See Table 24).

Table 24

One Area of Significant Discrepancy

A Comparison Between Students Found Ineligible and Eligible

	Incidence of One Area of Significant Discrepancy as Only Reason for Ineligibility		Eligible Despite the Single Reason of One Area of Significant Discrepancy			
Group	**Ineligible**	**Percentage**	**Eligible**	**Percentage**	χ^2	p
Overall	30/569	5.3%	38/566	6.7%		
Random Sample Total	15/322	4.7%	32/365	8.8%	4.53	<.05
Low Prevalence	3/48	6.3%	4/49	8.2%		
Average Prevalence	10/239	4.2%	13/247	5.3%		
High Prevalence	2/35	5.7%	15/69	21.7%		
Large District	2/56	3.6%	4/54	7.4%		
Small/Medium District	13/266	4.9%	28/311	9%		
Multiple Complaint	14/236	5.9%	6/201	3%	2.16	>.10
Parent Nominated	1/11	9.1%				

Once again, for purposes of this analysis, the Random group was separated into subgroups according to prevalence rate and size of school district. Prevalence rate, once again, represents the proportion of students within a school district identified in LD programs compared to the total number of students in that school district. District size is, once again, differentiated by large schools (9,500 or more students in the district) versus all other school districts (these being categorized as small/medium size school districts and including fewer than 9,500 students).

When categorized by prevalence rates, ineligibility rates are distributed as follows. Forty-eight students in the low prevalence Random group, 239 students in the average prevalence Random group, and 35 students in the high prevalence Random group were, for various reasons, declared ineligible for LD services. Of these, 3 were from the low prevalence group, 10 were from the average prevalence group, and 2 were from the high prevalence group (6.3%, 4.2%, 5.7%, respectively). Thus a total of 15 students from the Random Sample group was found ineligible for LD services, solely for the reason of a single area of significant discrepancy.

When analyzed by school district size, results of this study reveal a difference between large districts and small/medium size districts. Two students, or 3.6% of those in the large district sample who were declared ineligible for LD services, were found to have only a single area of significant discrepancy; whereas 13 students, or 4.9% of those ineligible in the small/medium size districts, were declared ineligible on this basis.

The Scope of a Single Area of Significant Discrepancy as Only Reason for Ineligibility

This section addresses whether student ineligibility for services, when due solely to the existence of a single area of discrepancy, is representative of practices found in the Random Sample group as a whole, or of individual subgroups.

Eligibility versus ineligibility when there is a single area of significant discrepancy. Of all students found ineligible from the Random Sample group, 15 students (4.7%) were declared ineligible for services solely because of having only one area of significant discrepancy (See Table 24). Conversely, of all students found eligible from the Random Sample group, 32 (8.8%) were found eligible for services despite having only one area of significant discrepancy (See Table 24). A significant difference was revealed when ineligibility versus eligibility was compared ($\chi^2 = 4.53$, $df = 1, p < .05$).

The finding of a higher proportion of students declared eligible versus ineligible, when the decision is based on one area of significant discrepancy, also applies to all of the Random Sample subgroups, although the disparity is most noteworthy within the high prevalence subgroup. Of those ineligible in the low prevalence group, 3 (6.3%) were declared ineligible for the sole reason of a single discrepancy area. Conversely, of those found eligible in the low prevalence group, four students (8.2%) were eligible for services despite having only one area of significant discrepancy. A similar outcome occurred in the average prevalence group, where 10 of the 239 students (4.2%) were declared ineligible for services, versus 13 out of 247 students (5.3%) who were found to be eligible. Finally, within the high prevalence group, 2 of the 35 students (5.7%) were declared ineligible for services, versus 15 of the 69 students (21.7%) who were declared eligible despite having only one area of significant discrepancy. Due to small sample sizes, statistical analyses were not conducted for subgroups.

When the Random Sample results are inspected by district size, a similar pattern between eligibility and ineligibility emerges. Of 56 students found ineligible from within large school districts, 2 (3.6%) were declared ineligible due soley to having only one significant discrepancy area; and 4 out of 54 students found eligible (7.4%) were so despite having only one area of significant discrepancy. Small/medium size districts produced a ratio of ineligibility to eligibility more indicative of the total Random Sample group. Specifically, of the 266 students found ineligibile, 13 students (4.9%) were ineligible solely because they had only one area of significant discrepancy; whereas 28 of the 311 eligible students (9%) were eligible despite having only one area of significant discrepancy.

An analysis of individual school districts, on the issue of a single area of significant discrepancy, showed results somewhat different from results for subgroups, and different also from the IQ score results. Individual districts in which flexibility was shown regarding this issue were not precisely the same as those in which inflexibility was seen. In 32 cases, students were found eligible for LD services despite having only one area of significant discrepancy. Of the nine school districts in which students were found ineligible for LD services, based solely on having only a single area of significant discrepancy, only five demonstrated flexibility on this issue (See Table 24). Thus there were four school districts in which eligibility for LD services was restricted due to a single area of significant discrepancy and in which no flexibility on this issue was shown. Conversely, seven school districts with no incidents of restriction of LD services based on the student having only one achievement area with a significant discrepancy, did identify as eligible one or more such students.

Table 25

Incidence of Single Area of Significant Discrepancy as only Reason of Ineligibility (*n* = 30)

Group	Students		Incidence Rate	Percent
Random Sample Total (*n* = 322)			15/322	4.7%
Low Prevalence Districts (*n* = 48)	A0102010	A0303019	3/48	6.3%
	A0201019			
Average Prevalence Districts (*n* = 239)	B1205016	B1604046	10/239	4.2%
	B1205024	B1604063		
	B1401013	B1610055		
	B1405010	B1701029		
	B1603065	B1711081		
High Prevalence Districts (*n* = 35)	C0101003	C0301011	2/35	5.7%
Large Districts (*n* = 56)	B1701029	B1711081	2/56	3.6%
Small/ Medium Districts (*n* = 266)	A0102010	B1603065	13/266	4.9%
	A0201019	B1604046		
	A0303019	B1604063		
	B1205016	B1610055		
	B1205024	C0101003		
	B1401013	C0301011		
	B1405010			
Multiple Complaint Districts (*n* = 236)	D0301001	D0405017	14/236	5.9%
	D0301045	D0405104		
	D0302049	D0406028		
	D0304022	D0406107		
	D0306013	D0501033		
	D0306024	D0502054		
	D0405015	D0503018		
Parent Nominated Districts (*n* = 11)	E0901001		1/11	9.1%

Specifically, the ineligible versus eligible number for each school district (represented by a letter and two digits) is as follows (See Tables 25 and 26). In each case, the first number in parentheses represents ineligible students and the second number represents eligible students in the district: low prevalence school districts A01(1-0), A02 (1-1), A03 (1-1), A04 (0-2); average prevalence school districts B03 (0-1), B06 (0-2), B07 (0-1), B12 (2-0), B13 (0-2), B14 (2-2), B15 (0-3), B16 (4-0), B17 (2-2); and high prevalence school districts C01 (1-1), C03 (1-0), C04 (0-14).

Table 26

Eligibility Despite Single Reason of One Area of Significant Discrepancy (*n* = 38)

Group	Students			Incidence Rate	Percent
Random Sample Total (*n* = 365)				32/365	8.8%
Low Prevalence Districts (*n* = 49)	A0201011	A0401001	A0402011	4/49	8.2%
	A0303003				
Average Prevalence Districts (*n* = 247)	B0303007	B1308015	B1505012	13/247	5.3%
	B0601006	B1403040	B1505020		
	B0603010	B1404034	B1710021		
	B0702011	B1501042	B1712051		
	B1307022				
High Prevalence Districts (*n* = 69)	C0101011	C0402012	C0402026	15/69	21.7%
	C0401011	C0402019	C0403014		
	C0401021	C0402020	C0403028		
	C0402005	C0402024	C0404007		
	C0402009	C0402025	C0405018		
Large Districts (*n* = 54)	A0401001	B1710021	B1712051	4/54	7.4%
	A0402011				
Small/Medium Districts (*n* = 311)	A0201011	B1501042	C0402019	28/311	9%
	A0303003	B1505012	C0402020		
	B0303007	B1505020	C0402024		
	B0601006	C0101011	C0402025		
	B0603010	C0401011	C0402026		
	B0702011	C0401021	C0403014		
	B1307022	C0402005	C0403028		
	B1308015	C0402009	C0404007		
	B1403040	C0402012	C0405018		
	B1404034				
Multiple Complaint Districts (*n* = 201)	D0103019	D0106031	D0410053	6/201	3%
	D0105027	D0302026	D0414108		
Parent Nominated Districts (*n* = 11)				0/11	0%

IQ Scores Below 90 and a Single Area of Significant Discrepancy

IQ scores below 90 and one single area of significant discrepancy have been discussed separately, above, as sole reasons for ineligibility for LD services. However, it is also problematic when these two practices are combined to determine ineligibility, in that each practice is contested as a violation of federal criteria. The results generated by the combination of the two are discussed below.

IQ Scores Below 90 and a Single Area of Significant Discrepancy as Reasons for Ineligibility

Four students were declared ineligible for LD programs because M-teams identified the two areas in question as reasons for ineligibility, those reasons being IQ scores below 90 combined with a single area of significant discrepancy. Two of these cases occurred in the Random Sample low prevalence, small/medium groups. These two students represent .6% of the Random Sample total, 4.2% of the low prevalence total, and .8% of the small/medium group total (See Table 27). No other Random subgroups produced cases of ineligibility for services based solely on these two factors.

Table 27

Below Average IQ and One Area of Significant Discrepancy

A Comparison Between Students Found Ineligible and Eligible

	Incidence of Below Average IQ and One Area of Significant Discrepancy as Only Reasons for Ineligibility		Eligible Despite Below Average IQ and One Area of Significant Discrepancy	
Group	**Ineligible**	**Percentage**	**Eligible**	**Percentage**
Overall	4/569	.7%	7/566	1.2%
Random Sample Total	2/322	.6%	5/365	1.4%
Low Prevalence	2/48	4.2%	2/49	4.1%
Average Prevalence			2/247	.8%
High Prevalence			1/69	1.4%
Large District			0/54	0%
Small /Medium District	2/266	.8%	5/311	1.6%
Multiple Complaint	2/236	.8%	2/201	1%
Parent Nominated	0/11	0%		

The Scope of IQ Below 90 and a Single Area of Significant Discrepancy as Reasons for Ineligibility

Although two students (.6% of the total Random group's ineligibility decisions and 4.2% of the low prevalence subgroup's ineligibility decisions), were declared ineligible for LD services because of these combined reasons, more cases of flexible application of the combined criteria are represented on the eligibility side of the issue. Here, five decisions (1.4%) resulted in determination of eligibility.

Of the five Random group determinations of eligibility for LD services, despite IQ below 90 combined with a single area of discrepancy, two came from the low prevalence group, two from the average prevalence group, and one from the high prevalence group (4.1%, .8%, 1.4%, respectively). Viewed according to school district size, all five cases are from the small/medium districts, and constitute 1.6% of all eligibility cases from that group.

Of the five cases where students were found eligible for LD services, despite having all IQ scores below 90 and only one area of significant discrepancy, no cases occurred in a school that had also determined ineligibility for the same reasons. Only two school districts in the Random Sample groups had declared ineligibility on that basis. Conversely, four school districts (five students), in which ineligibility had not been declared on this basis, did determine eligibility, even though the student had all IQ scores below 90 and only a single significantly discrepant achievement area (See Tables 28 and 29).

Specifically, the ineligible versus eligible incidence for each school district (represented by a letter and two digits) is as follows (See Tables 28 and 29). The first number in parentheses represents students who are ineligible for LD services and the second number represents students declared to be eligible for LD services: low prevalence school districts A01 (1-0), A02 (0-2), A03 (1-0); the average prevalence school district B14 (0-1), B15 (0-1); and the high prevalence school district C02 (0-1).

Table 28

Incidence of Below Average IQ and a Single Area of Significant Discrepancy as Reasons for Ineligibility (*n* = 4)

Group	Students	Incidence Rate	Percent
Random Sample Total (*n* = 322)		2/322	.6%
Low Prevalence Districts (*n* = 48)	A0103008 A0303010	2/48	4.2%
Average Prevalence Districts (*n* = 239)			
High Prevalence Districts (*n* = 35)			
Large Districts (*n* = 56)			
Small/Medium Districts (*n* = 266)	A0103008 A0303010	2/266	.8%
Multiple Complaint Districts (*n* = 236)	D0106039 D0106043	2/236	.8%
Parent Nominated Districts (*n* = 11)			

Table 29

Eligibility Despite All IQ scores Below 90 And One Area of Significant Discrepancy (*n* = 7)

Group	Students		Incidence Rate	Percent
Random Sample Total (*n* = 365)			5/365	1.4%
Low Prevalence Districts (*n* = 49)	A0201005	A0203008	2/49	4.1%
Average Prevalence Districts (*n* = 247)	B1409044	B1505038	2/247	.8%
High Prevalence Districts (*n* = 69)	C0201001		1/69	1.4%
Large Districts (*n* = 54)			0/54	0%
Small/Medium Districts (*n* = 311)	A0201005 A0203008 B1409044	B1505038 C0201001	5/311	1.6%
Multiple Complaint Districts (*n* = 201)	D0205138	D0405122	2/201	1%
Parent Nominated Districts (*n* = 11)			0/11	0%

A Summary of IQ Below 90, One Area of Significant Discrepancy, and the Two Combined

When the above three reasons for determining ineligibility for LD services are grouped together, 27 of the 322 students (8.4%) in the Random group were declared ineligible for LD services because their IQ test scores were below 90, because they had only one area of significant discrepancy, or because of a combination of the two. Conversely, 63 students from the Random group were identified as eligible despite having IQ test scores below 90, only one area of significant discrepancy, or a combination of the two. The number ineligible (27) is significantly lower than the number identified as eligible (63) ($\chi^2 = 11.84$, $df = 1$, $p < .001$). When decisions for ineligibility are analyzed by subgroups of the Random Sample, the total for each subgroup is: low prevalence, 9 of 48 (18.8%); average prevalence, 15 of 239 (6.3%); high prevalence, 3 of 35 (8.6%); large district, 3 of 56 (5.4%); and small/medium district, 24 of 266 (9.0%).

Table 30

Below Average IQ, One Area of Significant Discrepancy, and the Two Combined
A Comparison between Students found Ineligible and Eligible

	Incidence of Below Average IQ and One Area of Significant Discrepancy and Below Average IQ Combined with a Single Area of Significant Discrepancy as Only Reasons for Ineligibility		Eligibility Despite the Combined Reasons of Below Average IQ, one Area of Significant Discrepancy and Below Average IQ Combined with a Single Area of Significant Discrepancy			
Group	**Ineligible**	**Percentage**	**Eligible**	**Percentage**	χ^2	p
Overall	56/569	9.8%	82/566	14.5%		
Random Sample Total	27/322	8.4%	63/365	17.3%	11.84	<.001
Low Prevalence	9/48	18.8%	13/49	26.5%		
Average Prevalence	15/239	6.3%	29/247	11.7%		
High Prevalence	3/35	8.6%	21/69	30.4%		
Large District	3/56	5.4%	5/54	9.3%		
Small/Medium District	24/266	9.0%	58/311	18.6%		
Multiple Complaint	28/236	11.9%	19/201	9.5%	.66	>.10
Parent Nominated	1/11	9.1%				

When practices of these districts are analyzed for eligibility rather than ineligibility conclusions, a different pattern emerges. Of the 365 students identified as eligible for LD programs, 63 (17.3%) were identified as eligible despite having all IQ scores below 90, despite having only one area of significant discrepancy, or despite a combination of the two. This separates by subgroups as follows: low prevalence, 13 of 49 (26.5%); average prevalence, 29 of 247 (11.7%); high prevalence, 21 of 69 (30.4%); large district, 5 of 54 (9.3%); and small/medium district, 58 of 311 (18.6%).

Of the 12 randomly selected school districts that denied eligibility (27 cases) on one or a combination of the criteria of IQ below 90 and a single area of discrepancy, 9 school districts also determined eligibility (43 cases), despite students possessing these same characteristics. An additional 20 cases within five school districts represented students declared eligible for LD services, even though all their IQ scores were below 90, they had only one significant discrepancy area, or a combination of these two. These five school districts made no ineligibility decisions based on IQ below 90, one significant discrepancy only, or on a combination of these two (See Table 30).

Specifically, the ineligible versus eligible incidence for each school district with at least one ineligibility case (represented by a letter and two digits) is as follows. The first number in parentheses represents ineligible students and the second number represents eligible students: low prevalence school districts A01 (2-0) A02 (2-5), A03 (4-5), A04 (1-3); the average prevalence school districts B03 (0-1), B06 (0-2), B07 (0-1), B12 (3-3), B13 (0-2), B14 (3-5), B15 (1-13), B16 (6-0), B17 (2-2); and the high prevalence school districts C01 (1-1), C02 (1-6), C03 (1-0), C04 (0-14)

All Reasons for Determining Ineligibility

Five hundred fifty-eight students from the Random Sample and Multiple Complaint groups were declared ineligible for LD services. Of these, 22 were identified as ineligible for the sole reason of all IQ scores below 90; 29 were identified as ineligible for the sole reason of a single area of significant discrepancy, and 4 were identified as ineligible for LD services because of all IQ scores below 90 and a single area of significant discrepancy combined. The remaining 503 were denied eligibility because of other reasons and combinations of reasons. See Table 31 for a listing of all reasons for determining ineligibility.

Table 31

All Reasons for Determining Ineligibility

CRITERIA	**Number of Students**
IQ Variations	
Solely because of IQ < 90*	22
IQ < 90 and one area of significant discrepancy	4
IQ < 90 and achievement above 50%	31
IQ < 90, one area and an exclusionary issue	2
IQ < 90 and no intrachild variability	11
IQ < 90, achievement above 50% and an exclusionary issue	6
IQ < 90 and an exclusionary issue	3
IQ < 90 and less than one year delay	2
IQ < 90, exclusionary issue, and no intrachild variability	3
IQ < 90, achievement above 50%, exclusionary issue, and no intrachild variability	1
IQ < 90, achievement above 50%, no intrachild variability	2
IQ < 90 and poor documentation	2
Total: IQ Variations	**89**
One Area of Significant Discrepancy Variations	
Solely because of only one area of discrepancy*	29
Only one area and a lack of intrachild variability	5
Only one area and an exclusionary issue	6
Only one area and poor documentation	2
Total: One Area Variations	**42**
Actual Achievement Above 50% of Expected Achievement Variations	
Solely because of achievement > 50%**	171
Achievement > 50% and an exclusionary issue	19
Achievement > 50% and no intrachild variability	26
Achievement > 50%, no intrachild variability, and an exclusionary issue	3
Achievement > 50% and poor documentation	10
Solely because did not meet significant discrepancy--method not 50%	40
Total: Achievement Above 50% Variations	**269**
Less Than One Year Delay Variations	
Solely because delay was less than one year**	37
Less than one year delay and exclusionary issues	8
Less than one year delay and no intrachild variability	11
Less than one year and poor documentation	6
Total: Less than one year delay variations	**62**

Table 31, Continued

CRITERIA	Number of Students
Alternatives Other Than LD Program Services	
CD Placement	14
CD and Speech and Language	2
Speech and Language Placement	6
Speech and Language and OHI	1
ED placement	15
ED and Speech and Language	1
TBI Placement	1
OHI Placement	1
Autism	1
Total: Alternatives other than LD program services	**42**
Other Areas	
Solely 'no need***	5
No need a contributing factor, along with at least one other reason***	10
Solely because of no intrachild variability	8
No intrachild variability and an exclusionary issue	3
Poor Documentation	10
Untestable	5
Total: Other	**41**
Child Met Exclusionary Criteria	**13**

*The 42 students in the Alternatives Other Than LD Program Services do not include students from the 'ineligible solely because of IQ <90' or 'solely because of only one area of discrepancy'. These 22 and 29 students, respectively, are listed according to the reason they were found ineligible for LD. Of these 51 students, 18 were placed in another EEN program as indicated on the M-team reports reviewed for this study.
**The 42 students in the Alternatives Other Than LD Program Services also do not include students who were found ineligible for LD solely because they didn't meet the 50% discrepancy requirement or the students who were found ineligible solely because of less than one year delay. Of these 208 students (171 + 37), 30 were found eligible for another EEN program as indicated on the M-team reports reviewed for this study.
***For these 15 students, no need is used one of two ways: they have the handicapping condition of learning disabilities but do not need EEN services, or no need contributed to the decision for ineligibility, but was not the only reason.

When the phrase an *exclusionary issue* is used it means that the reviewer believed that enough mention was made in the records of an exclusionary factor (e.g. motivation) so that, even if a student had met all LD eligibility criteria, that student may have been found ineligible for LD because of exclusionary criteria.

Students Found Ineligible for LD but Granted Another EEN Placement

It is possible, following Wisconsin's EEN procedures, for a student to be referred for more than one handicapping condition, e.g. learning disabilities and speech and language, learning disabilities and emotional disturbance, etc. When this occurs, M-teams are set up accordingly, and staff certified in each of the handicapping conditions are appointed to complete assessment and to participate in the M-team processes. When the M-team convenes, each of the areas of suspected handicapping condition is discussed, and decisions are made whether the student meets the eligibility criteria of each handicapping condition. It is possible that a student thus referred and evaluated will be determined to have met eligibility criteria in one, neither, or both of the handicapping conditions. It is also possible, depending on the judgment of the M-team, that one of the handicapping conditions will be found exclusionary of the other. Of all 56 students in the Random, Multiple Complaint, and Parent Nominated groups who were found ineligible for LD based on the sole reason of all IQ scores below 90, one area of significant discrepancy, or the two combined, 18 students were found by M-teams to be eligible for a second EEN area.

Random Sample Group: Other Issues that May Be Problematic

Although the primary focus of this research has been to determine the extent to which students in Wisconsin are found ineligible for LD services based solely on IQ scores below 90, or solely because of just one area of significant discrepancy, other potentially problematic issues have emerged from the data. The major additional issue is the determination of ineligibility of students who did not meet the 50% cutoff for significant discrepancy. Another practice identified by the data, which is potentially problematic, is the difference between Wisconsin's and the federal criteria in the areas for determination of significant discrepancies.

Wisconsin Versus Federal Achievement Areas

Another difference exists between Wisconsin and federal criteria for learning disabilities, in the academic areas indicated for significant discrepancies. Wisconsin's criteria, in this regard, generally indicate broad overall academic categories, such as reading and math. Federal criteria, on the other hand, indicate subcategories of these areas. Reading, for example, is divided in the federal criteria into basic reading skill and reading comprehension. Math, in the federal criteria, is divided into mathematical reasoning and math computation. Since a student's achievement in these areas, as they are indicated by the federal criteria, may be derived in some cases from subscores rather than from broad overall achievement test scores, the federal criteria are apparently more lenient than Wisconsin's criteria, in this regard. Wisconsin's rules do mention conditions in which subtest scores may be used to meet the academic functioning criteria in identification of learning disabilities, but these conditions are stringent and do not negate the observation that criteria for determination of significant discrepancies in Wisconsin are less lenient than the federal criteria.

On the other hand, spelling has remained as an area in which students may demonstrate a significant discrepancy in Wisconsin; but it is not included as an area of discrepancy in the federal criteria. Another difference is that the federal criteria indicate listening comprehension and oral expression to be areas of possible significant discrepancies indicative of learning disabilities, whereas in Wisconsin, discrepancies in these areas are likely to result in eligibility for Speech and Language programs, rather than for LD. Finally, the area of written language or written expression is presented as a single area in both Wisconsin's and the federal government's list of possible areas of significant discrepancies. It is assumed that each of these categorizations represent a composite of writing abilities.

With the above differences between Wisconsin and the federal eligibility criteria in mind, records for the students in this study who had been found ineligible for LD services, because they had no areas of significant (50%) discrepancy, were examined again. It was also kept in mind, during this final examination that, following federal criteria, students may be found eligible for LD based on a single area of discrepancy. Therefore, those cases were sought, in this final review, which showed at least one area of significant discrepancy in the federal categories of basic reading skill, reading comprehension, math calculation, or math reasoning. Five such cases were found within the Random Sample group. One student had a significant discrepancy in basic reading skills, three in reading comprehension, and one in math calculation.

Criteria of 50% to Identify Significant Discrepancy

In the total sample, 171 students were found ineligible for LD services solely because they did not meet Wisconsin's 50% significant discrepancy criteria. Of these 171 students, 81 (47.4%) came from the Random Sample group. Of these 81 students, 16 had one area of achievement between 51% and 60% of expected achievement, or a discrepancy of 40% to 49%. Six additional students demonstrated actual achievement within 51% to 60% in two areas, thus demonstrating discrepancies between 40% and 49% in both areas (See Table 32a).

Table 32a

Ineligible for Sole Reason that Actual Achievement is Between 51-60% of Expected Achievement in One* or Two** Areas of Achievement

Group	**Students**			**Incidence Rate**	**Percent**
Random Sample Total (*n* = 322)				22/322	6.8%
Low Prevalence Districts (*n* = 48)	A0305038*			1/48	2.1%
Average Prevalence Districts (*n* = 239)	B0802002* B0802004* B0802013* B0802014* B1002007* B1003010* B1205014*	B1304021* B1403009** B1405016* B1406020* B1501002* B1504023* B1504044**	B1711079* B1716065* B1716066* B1712054** B1714037** B1716067**	20/239	8.4%
High Prevalence Districts (*n* = 35)	C0303016*			1/35	2.9%
Large Districts (*n* = 56)	B1711079* B1716065*	B1716066* B1712054**	B1714037** B1716067**	6/56	10.7%
Small/Medium Districts (*n* = 266)	A0305038* B0802002* B0802004* B0802013* B0802014* B1002007*	B1003010* B1205014* B1304021* B1403009** B1405016*	B1406020* B1501002* B1504023* B1504044** C0303016*	16/266	6%
Multiple Complaint Districts (*n* = 236)	D0106045* D0302007* D0302025** D0302028** D0303003* D0304038* D0304050** D0403079* D0405019*	D0406033* D0407132* D0408036* D0410044* D0410054** D0411099* D0411109* D0412051*	D0414061* D0501033* D0502039* D0502047* D0504030** D0505044* D0505056** D0504061*	25/236	10.6%
Parent Nominated Districts (*n* = 11)				0/11	0%

Examining this information in terms of the total random sample, 22 out of the 322 (6.8%) students who were found ineligible solely because they did not meet Wisconsin's 50% criteria, had at least one area that was between 51% and 60% of expected achievement (i.e. a 40% to 49% discrepancy). Of the 48 students in the low prevalence group who were found ineligible, one student (2.1%) was found ineligible for this reason. Of the 239 students in the average prevalence group, 20 (8.4%) were found ineligible for this reason. Of the 35 students from the high prevalence group, 1 (2.9%) was found ineligible for this reason. Categorizing the same information by district size produces the following results: large school districts 6/56 (10.7%), small/medium school districts 16/266 (6.0%).

Table 32b

Actual Achievement Above 50% of Expected Achievement

Declared Eligible for LD Services Despite Actual Achievement Above 50% of Expected Achievement in One* or Two** Areas of Achievement

Based on a 10.25% Random Sample (*n* = 58) of the 566 Students Found Eligible for LD***

Group	Students			Incidence Rate	Percent
Random Sample Total (*n* = 365)				14/365	3.8%
Low Prevalence Districts (*n* = 49)	A0201012*	A0401001**		2/49	4.1%
Average Prevalence Districts (*n* = 247)	B0603002* B0603010* B0702002* B0703008**	B0901008* B1101001** B1202002*	B1501019** B1504010** B1706014*	10/247	4.0%
High Prevalence Districts (*n* = 69)	C0301010*	C0402024*		2/69	2.9%
Large Districts (*n* = 54)	A0401001**	B1706014*		2/54	3.7%
Small/Medium Districts (*n* = 311)	A0201012* B0603002* B0603010* B0702002*	B0703008** B0901008** B1101001** B1202002*	B1501019** B1504010** C0301010* C0402024*	12/311	3.9%
Multiple Complaint Districts (*n* = 201)	D0106036**	D0414063**	D0507036**	3/201	1.5%
Parent Nominated Districts (*n* = 11)				0/11	0%

To achieve information about school system placement practices in relation to significant discrepancy requirements, a 10.25% random sample from the 566 students who were eligible for LD services was drawn. Of the 58 students in this randomly selected group, 14 (24.1%) from the Random Sample group were identified as eligible for services, even though their actual achievement scores were above 50% of expected achievement. Nine of these students from the Random Sample group had one area that qualified under Wisconsin's 50% requirement, and a second area that did not strictly meet the 50% cutoff but which the M-team declared significant. Five of these students had two areas declared significant by the M-team, despite both areas being above 50% of expected achievement. The 24.1%, extrapolated to the total eligible Random Sample group of 365 students, would predict that approximately 88 of these students would be found eligible, despite having achievement scores above the 50% level.

Multiple Complaint Group: Areas of Contention

Student records from within the Multiple Complaint group were analyzed for ineligibility and eligibility based on IQ scores below 90 and one area of significant discrepancy. Results are presented below.

IQ Scores Below 90

Students within the Multiple Complaint group who were declared ineligible for LD services, solely on the basis of IQ scores below 90, are discussed below.

IQ Scores Below 90 as the Only Reason for Ineligibility

Twelve students in the Multiple Complaint group were found ineligible for LD services solely because their IQ scores were below 90 on a multiple score test, or below 86 on a single score test. These 12 students represent 5.1% of the 236 students from the Multiple Complaint group who were, for various reasons, declared ineligible for services (See Table 21).

The Scope of IQ Scores Below 90 as the Only Reason for Ineligibility

It is necessary to determine whether the 12 students identified above, who were declared ineligible for services for IQ reasons alone, represent the general practice of the Multiple Complaint school districts. To determine the more general practice of this group, students recommended as eligible for LD services despite having all IQ scores below 90 were identified.

Eligibility versus ineligibility when all IQ scores are below 90. Twelve students (5.1%) within the Multiple Complaint group were declared ineligible because of below 90 IQ scores (See Table 21). Conversely, 11 students (5.5%) from the Multiple Complaint group were identified as eligible for LD services despite all their IQ scores, (full-scale, verbal scale, and performance scale) being below 90 (See Table 21). The difference between those ineligible and eligible is not statistically significant ($\chi^2 = .03$, $df = 1$, $p > .10$)

Represented by individual districts, the two districts in which ineligibility decisions were made were also the two districts in which all the flexible eligibility decisions were made. That is, District D02 identified nine students as ineligible because they had all IQ scores below 90; but they also declared seven students as eligible for LD services despite having all IQ scores below 90. Likewise, district D04 identified three students as ineligible and four students as eligible who had all IQ scores below 90. None of the other three districts in the Multiple Complaint group identified students as eligible despite having all IQ scores below 90, or ineligible based solely on IQ scores below 90.

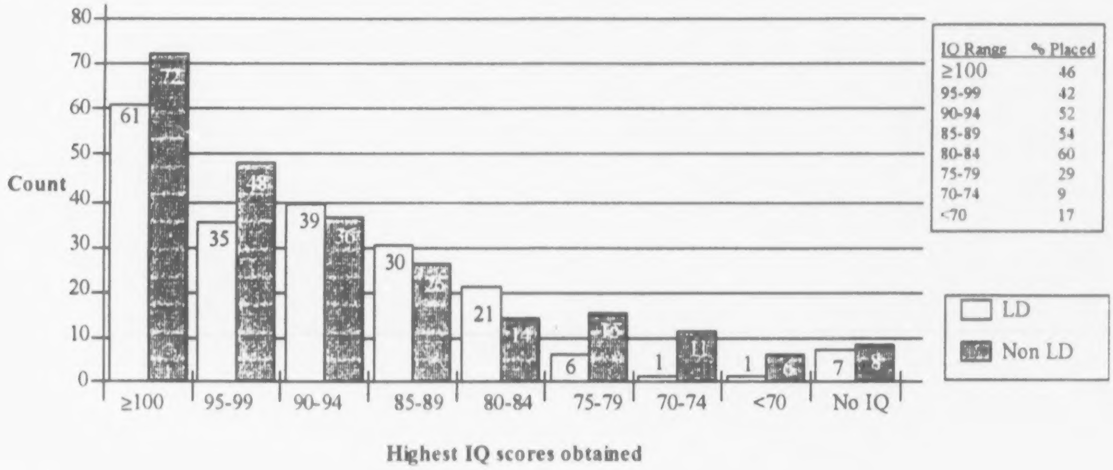
Comparing eligibility versus ineligibility for IQ score ranges. When students are grouped within narrow ranges by their full-scale IQ score and then categorized by the M-team's determination of eligibility versus ineligibility for services, a comparison can be made to determine opportunity for services by IQ range (See Figure 3).

Forty-six percent of the students with a 100 or higher IQ score were determined eligible for LD services. This is identical to the average eligibility rate of 46% for all Multiple Complaint sample subjects in this study. Forty-two percent of the students with full-scale scores between 95 and 99 were found to be eligible, as were 52% of the students between 90 and 94 full-scale IQ, 54% of the students between 85 and 89 full-scale IQ, 60% of students between 80 and 84 full-scale IQ, 29% of the students between 75 and 79 full-scale IQ, and 9% of the students with full-scale IQs between 70 and 74.

Another view of this same information is obtained when IQ categorization is by the students' highest achieved IQ scores instead of their full-scale scores. The results of this analysis are: an eligibility rate of 47% for IQ scores 100 or higher, 50% for IQ scores 95 through 99, 54% for scores 90 through 94, 38% for scores 85 through 89, 15% for scores 80 through 85, and 0% for scores 75 through 79 (See Figure 4).

Figure 3

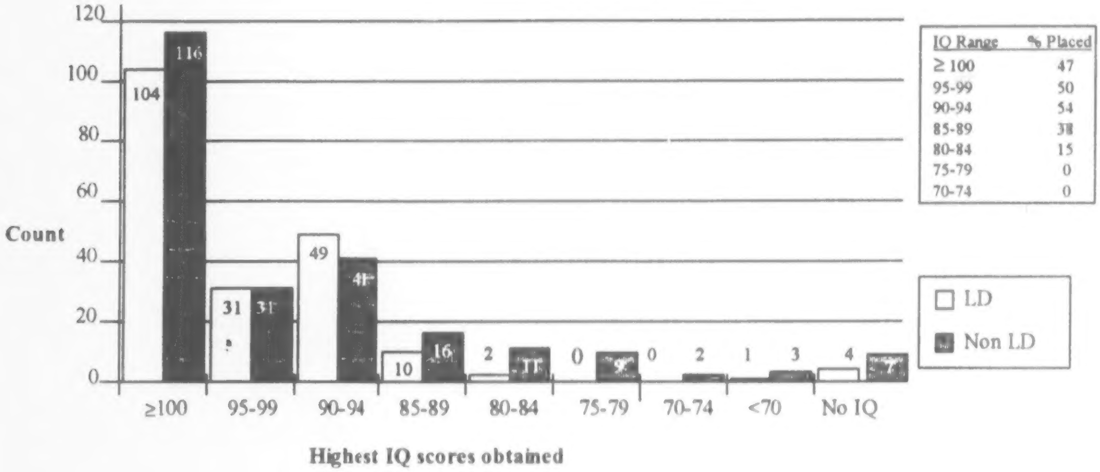
Full-Scale IQ Scores by LD Eligibility for Multiple Complaint Group



IQ Range	% Placed
≥100	46
95-99	42
90-94	52
85-89	54
80-84	60
75-79	29
70-74	9
<70	17

Figure 4

The Highest IQ Score (Full-Scale, Verbal Scale, Performance Scale) for the Multiple Complaint Group



Comparing full-scale scores eligibility data with that from Iowa. A report describing Iowa's placement practices was published by Kavale and Reese (1992). Among other conclusions, Kavale and Reese determined that 14% of the students they studied had been placed in LD classrooms with full-scale IQ scores below 86. This compares to 17.41% of students in this study from the Multiple Complaint districts, who were found to be eligible for LD placement when having full-scale IQ scores below 86 (See Appendix F).

A Single Area of Significant Discrepancy

Students within the Multiple Complaint group who were found ineligible for LD services, solely on the basis of having only one significant discrepancy area, are discussed below.

A Single Area of Significant Discrepancy as the Only Reason for Ineligibility

Fourteen students in the Multiple Complaint group were declared ineligible for LD services solely because they had only one area of significant discrepancy. These 14 students represent 5.9% of the 236 students from the Multiple Complaint group who were, for various reasons, declared ineligible for LD services (See Table 24).

The Scope of a Single Area of Significant Discrepancy as the Only Reason for Ineligibility

It is informative to determine whether the ineligibility decisions of the 14 students in the Multiple Complaint group represent the general practice of the Multiple Complaint school districts. To determine the more general practice of this group, students identified as eligible for LD services despite having only one area of significant discrepancy were identified.

Eligibility versus ineligibility when there is a single area of significant discrepancy. As indicated above, fourteen students within the Multiple Complaint group were found ineligible for LD services due to a single area of significant discrepancy. Conversely, six students (3%) from the Multiple Complaint group were declared eligible for LD services despite having only one area of significant discrepancy (See Table 24). No significant difference exists when ineligible is compared to eligible ($\chi^2 = 2.16$, $df = 1$, $p > .10$).

Analysis by school districts reveals that, within two of the three districts declaring these 14 students ineligible on the basis of a single discrepancy, three other students were determined eligible for LD services when having only a single area of significant discrepancy. District D01 declared no students as ineligible but three students as eligible, District D03 declared six ineligible and one eligible, District D04 declared five ineligible and two eligible, and District D05 identified three students as ineligible and none as being eligible for LD services.

IQ Scores Below 90 and a Single Area of Significant Discrepancy

Two students, .8% of all ineligible students within the Multiple Complaint group, were ineligible because they had all IQ scores below 90 and only one area of significant discrepancy. These two students were from the same school district. Conversely two students, 1% of all eligible students, were found to be eligible despite having all IQ scores below 90 and only one area of significant discrepancy. These two students were from two separate districts, neither of which had declared students ineligible on this basis (See Table 27).

A Summary of IQ Below 90, One Area of Significant Discrepancy, and the Two Combined

When all the above practices are grouped together, 28 of the 236 students (11.9%) of the Multiple Complaint group are found to have been declared ineligible for LD services because their IQ test scores were below 90 or because they had only one area of significant discrepancy or a combination of these reasons (See Table 30).

When the practices of the Multiple Complaint districts are evaluated for flexible application of the same eligibility criteria, a similar pattern emerges. Nineteen of the 201 students (9.5%) were found eligible for LD services despite having all IQ scores below 90, only one area of significant discrepancy, or a combination of the two (See Table 30). The ineligibility decisions are not significantly different from eligibility decisions ($\chi^2 = .66$, $df = 1$, $p > .10$).

Viewing individual cases by school districts presents an individual district record of the prevalence of flexible versus inflexible application of the contested criteria. When IQ below 90, a single area of significant discrepancy, and the two combined are taken as a group, District D01 is found to have made two ineligibility decisions and three eligibility decisions; District D02 had nine ineligibility decisions and eight eligibility decisions; District D03, six ineligibility decisions and one eligibility decision; District D04, eight ineligibility decisions and seven eligibility decisions; and District D05, three ineligibility decisions and no eligibility decisions.

All Reasons for Determining Ineligibility

The issue of all reasons for determining ineligibility is discussed on page 77 under Random Sample Group: "Areas of Contention, all Reasons for Determining Ineligibility" (See Table 31).

Students Found Ineligible for LD but Granted Another EEN Placement

Of all students from the Random and Multiple Complaint groups who were found ineligible for LD on the basis of IQ scores below 90, one area of significant discrepancy, or the two combined, 18 were found by the same M-team to be eligible for services in a second EEN area. For more information, see "All Reasons for Determining Ineligibility."

Multiple Complaint Group: Other Issues that May Be Problematic

As with the Random Sample groups, data for the Multiple Complaint group also illustrates other practices that may be considered problematic. These are essentially the same practices as are found in the Random group data. The major additional issue is, once again, the ineligibility of students who do not meet the 50% cutoff for significant discrepancy. Another issue, once again, is regarding the difference between Wisconsin's and the federal areas for determination of significant academic discrepancies.

Wisconsin Versus Federal Achievement Areas

The federal academic subcategories of basic reading skill, reading comprehension, math education, and math reasoning were analyzed for the Multiple Complaint group. Six Multiple Complaint group subjects who were identified as ineligible for LD had a single significant discrepancy in one of these areas. Three students had a significant discrepancy in basic reading skills, one in reading comprehension, one in math calculation, and one in math reasoning.

Criteria of 50% to Identify Significant Discrepancy

As discussed earlier, 171 students in the total sample were found ineligible for LD services solely because they did not meet Wisconsin's 50% significant discrepancy criteria. Of these 171 students, 90 (52.6%) were from the Multiple Complaint group. Of these 90 students, six students had two areas of achievement that fell between 51% and 60% of actual achievement. These students came from three different districts and made up 3% of the total number of students who were found ineligible in the Multiple Complaint group. Twenty-five students from Multiple Complaint districts (10.6%), out of 236 students from this group who were ineligible for LD services, were denied these services because their actual achievement was between 51% to 60% of their expected achievement; thus they did not meet the 50% level required for placement (See Appendix G).

A randomly selected group of 58 students yielded three (5.2%) students from the Multiple Complaint group who were identified eligible for LD, despite having achievement scores above the 50% cutoff level. Extrapolated to the total eligible Random Sample group of 201 students, this predicts that 5.2% of these, or about 10 students, would be eligible for LD services despite having achievement scores above the 50% cutoff level.

Parent Nominated Group: Areas of Contention

Twenty students were nominated by parents. Of these 20, 7 nominations arrived too late for records to be evaluated before the final report deadline. Records were acquired from the school districts for the other 13 nominations, however, and these were analyzed for all information, just as the 1124 records for the students in the Random Sample and the Multiple Complaint groups had been. Of the 13 cases, 2 were excluded; 1 because it involved an IEP issue rather than a placement issue, and the other because it did not involve a referral for learning disabilities evaluation. In one of the 11 remaining cases, review of the records showed that the student had been ineligible for LD services due to having only one area of significant discrepancy

Survey Results

To gather information on research questions two and four, a survey was developed for the special education directors of the districts involved in the study. An additional survey was sent to random samples of participants in the M-team processes, for the 1124 students in the Random and Multiple Complaint groups.

Special Education Directors

In general, results of the survey from special education directors were similar, but not identical, to the data developed from review of the M-team reports (See Appendix Q).

Male referral rates, according to the survey, were 64.4% for the Random Sample group and 62.2% for the Multiple Complaint group. Female referral rates were 35.6% and 37.8%, respectively. The rate of eligibility for LD programs, for students in the Random Sample was 51.7% compared to 44.6% for the Multiple Complaint group. Male students were found to be eligible at rates of 35.1% and 29.6%, respectively, and female students were eligible at rates of 16.6% and 14.9%, respectively, for the Random Sample and Multiple Complaint groups.

Special education administrators indicated that 53% of the students in the Random group and 42% of the students in the Multiple Complaint group, with IQ scores below 90, were eligible for LD services. Males in the Random Sample group, with IQ scores below 90, were found eligible 58% of the time, whereas males in the Multiple Complaint group were found eligible 59% of the time. Females in the Random group were found eligible 42% of the time, while females in the Multiple Complaint group were found eligible 41% of the time.

Male students comprised 67.9% of the students placed in LD programs during the 1994-1995 school year in the Random districts, and 66.4% in the Multiple Complaint districts, according this survey. Conversely, female students comprised 32.1% of the placements in the Random districts during the same school year, and 33.6% of those placed in the Multiple Complaint districts. These placement rates (number found eligible divided by number of students referred for LD placement) are consistent with other studies, in which placement rates ranged from 52% to 61% (Dangel & Ensminger, 1986; Furlong & Yanagida, 1985; Fugate, Clarizio, &

Phillips, 1993; Furlong, 1988; and Payette, Clarizio, Phillips, & Bennett, 1995). The percentage of male and female students identified as LD in this survey is also consistent with other studies. Clarizio and Phillips (1986), for example, found that 78% of a sample of Michigan LD students were males, while McLeskey and Waldron (1990) found that, among students identified as LD in Indiana, males outnumbered females by a 3 to 1 ratio.

The most frequent participants on M-teams, according to directors of special education, were classroom teachers (100% at the elementary and middle schools and 90% at the high school); the LD teacher (97% at the middle and high school levels and 93% at the elementary level); the school psychologist (100% at all levels); and the parent (72% of the time at the elementary level and 66% of the time at the middle and high school levels). Special education administrator opinions were more at variance with the actual M-team record results in this area of M-team composition than in any other area.

The school psychologist was most frequently identified as the M-team chairperson, at all levels, in both the Random and the Multiple Complaint districts.

Ninety-three percent of the districts surveyed identified no standard battery for determining intellectual functioning, and 86% of the districts have no standard battery for measuring academic achievement. The most frequently used tests for determining intellectual functioning, however, are the Wechsler Scales (WISC-III, WPPSI-R), the Stanford-Binet Intelligence Scale-Fourth Edition, and the Kaufman Assessment Battery for Children. The most frequently used academic achievement tests are the Woodcock-Johnson PsychoEducational Battery-Revised (tests of achievement), Key Math-Revised, Wechsler Individual Achievement Test, Woodcock Reading Mastery Test, Kaufman Test of Educational Achievement (Comprehensive Form), Test of Written Language, Test of Written Spelling, and Wide Range Achievement Test. The most frequently used intelligence and achievement tests, as reported by this survey, are the same as those reported in other studies and represent tests with the most appropriate levels of reliability and validity.

PI 11 language provides the basis for determination of the intellectual functioning criterion and the significant discrepancy criterion, according to directors surveyed. Policies regarding these procedures are in writing in 62% of the districts included in this study. Most districts (73%), have a written policy in place regarding use of prereferral assistance teams. All of the low prevalence rate districts have such teams, while only two of the high prevalence rate districts use prereferral assistance teams. Although the composition of these teams varies greatly across districts, the most frequent members of prereferral teams are the classroom teacher, the special education teacher, and the school psychologist. Counselors and principals are more likely to be present at prereferral team meetings at the middle school and high school levels than at the elementary level. Other specialists (AODA counselor, school nurse, reading specialist, social worker, for example) are present on an as-needed basis.

Training provided to prereferral assistance teams ranges from no formal training to sending selected personnel to multi-day training institutes. The preferred method of training for prereferral team work is through school inservice programs. These are provided by approximately one-half of the districts, according to results of this survey. Much of this training is provided by within-district personnel.

Collaboration between regular and special education teachers is implemented on a regular basis by 90% of the elementary and middle schools, and by 86% of the high schools surveyed. Only two school districts (one average prevalence district and one high prevalence district) indicated collaboration was not implemented on a regular basis (These two districts also did not utilize prereferral assistance teams). The nature of collaboration varies greatly, but most frequently utilizes team teaching and cooperation between regular education teachers regarding individual students (See Appendix Q for the verbatim responses of administrators to the nature of collaboration or inclusion).

Research Questions Two and Four

Survey responses by directors of special education and other professionals were analyzed (See Appendix R).

Research Question Two

Responses to Research Question 2 (If a student meets the criteria for learning disabilities, how is it determined whether the child needs special education?) indicate that no clear-cut process exists for making this determination. Most respondents, however, indicated that a two-step process is utilized. First, the existence of a learning disability is determined; then the M-team considers how the child is functioning in the regular classroom. At this point, the effectiveness of previous modifications to the curriculum is examined. As one LD teacher stated, "The need is determined by collective judgment of the multidisciplinary team members taking into account the success or failure of interventions attempted through regular education." Not all respondents identified a clear-cut process, however. One respondent noted, "In some districts it is just assumed that meeting the criteria means the child needs special education."

Other respondents noted that the special education director or designee determines placement based on M-team recommendations. As one principal stated, "Once the various tests have been administered by the specialists involved, the M-team meets to review and discuss all the findings and to make an appropriate recommendation. The M-team report is forwarded to the director of special education. All the information is reviewed, with a decision being made by the director as to whether or not special needs are warranted."

The classroom teachers' perspective on how the need for special education is determined varied from the perspective of other respondents to this survey. While responses were received from only five classroom teachers, these five were consistent in indicating that, once eligibility was determined, special education services follow. As one teacher commented, "If the child qualifies then he/she automatically receives special education help in those qualifying areas. An IEP is written and assistance is given either within the regular classroom and/or as partial 'pull-out.'"

Research Question Four

In response to Research Question 4, respondents were asked to make suggestions for improving Wisconsin's LD eligibility criteria and identification procedures. Comments from M-team participants reflected a wide range of opinions, with seven respondents indicating that current LD criteria and procedures are satisfactory and not in need of change. Most M-team respondents, however, indicated that changes are needed. An analysis of these responses indicates two main areas of need for change; these are eligibility criteria and teacher training.

The most frequently recommended change by M-team participants, in the area of LD eligibility, was to replace the 50% discrepancy criterion and the Bond-Tinker formula with the use of standard scores for comparing ability and achievement. Several respondents recommended the use of regression-based tables in order to simplify the process. The next most frequently mentioned change was that only one area of academic discrepancy should be required and that Wisconsin's LD eligibility criteria should be made consistent with the federal criteria.

M-team participants were also consistent in recommending that M-teams retain their ability to exercise professional judgment, especially in making eligibility decisions. Respondents spoke of the need to make eligibility criteria more flexible. As one LD teacher mentioned, "Expand the criteria to allow more "grey area" students to be eligible for services. Some students who are truly learning disabled, in my opinion, do not fit the criteria, but will not and often do not survive in the high school system. They are too 'low' to be successful, but not 'low' enough to get the criteria of the state." Another respondent, however, recommended that the eligibility criteria should be more stringent, so that only 'true' LD would qualify for LD services.

Still on the subject of eligibility, some recommended that the requirement for a minimum IQ be dropped, while others wished to exclude from LD placement any student with an IQ less than 90. One speech therapist stated, "I see many students who demonstrate in-child deficits, have good attendance, put forth good effort, but still struggle. They may meet the criteria for LD with their academic functioning, but not with intellectual functioning. Can't someone with a 75 IQ have a learning disability?" This view was echoed by a school psychologist with the following comment, "Never have I seen the psychologist's judgment of normal/average learning potential accepted by our supervisor unless some IQ score supports it (not in the last 6 or 7 years)." Such comments were not wide spread, but did indicate that in some schools a stringent interpretation of the IQ criterion is used.

More extensive training of current and prospective teachers was recommended by several M-team respondents. Such training, respondents said, should focus on identification procedures, knowledge and implementation of LD criteria, and on development of appropriate intervention strategies. Other suggested changes included: documentation of in-child variability; the use of prereferral interventions; and medical and social histories.

The responses of special education directors to Research Question 4 were similar to those of M-team participants. Three special education directors indicated that no changes are needed in current LD criteria and procedures. In general, however, directors of special education who responded to the survey indicated that changes are needed. By far the most frequent suggestions were within the area of determination of significant discrepancies. Twenty-two responses occurred in this area, with most suggestions focused on the need to eliminate or to de-emphasize the Bond-Tinker formula, and to establish a standard score approach. One director stated, "This formula often times in the lower grades (2 through 4) is not an appropriate means to determine a student's significant discrepancy level. The majority of the time in these grades, the referred student's levels of current achievement are well above their significant level of discrepancy. The formula then delays a student's entrance to special education until a later time." Meanwhile, however, another respondent states, "I believe the criteria used in Wisconsin needs to be more restrictive since they lead to an unacceptably high number of children being labeled 'handicapped.'"

Seven directors indicated a need to establish more consistency between the state and federal criteria and, although there was little agreement on course of action, eight respondents expressed concern about the determination of actual achievement levels. IQ criteria were mentioned only three times, and in two of these cases, the respondent recommended that the requirement of average intellectual functioning be maintained in the determination of a learning disability.

Six respondents spoke to the need for better articulation of the need for special education services and/or improved services outside of special education. Three focused on the problem of grey area children, and recommended a more flexible approach when considering them for eligibility.

Regarding exclusionary factors, one respondent stated that we should "more strongly emphasize exclusionary factors" and another stated we should "continue with exclusionary variables."

Several respondents recommended that prereferral intervention strategies be mandatory. Interestingly, no special education director addressed Wisconsin's requirement of two areas of academic discrepancy.

Many of the comments from the directors were quite specific and included such recommendations as:

- * Need to define more clearly the skills that should be addressed in the area of written language
- * Spelling should not be an area of academic deficit that is considered in the eligibility criteria
- * Add to rules what it means to need special education
- * Eliminate categorical placements for early childhood
- * Allow more flexibility and professional judgment to be applied
- * Eliminate grey area exclusion

Telephone Interview Results

Telephone interviews were done during a one-week period after data analysis for the key research questions of this study had been completed. In the process of that analysis, several issues had become apparent which, although not immediately related to the key research issues, did raise questions regarding the practices in Wisconsin relative to LD identification procedures. In addition, a charge to the researchers from OSEP and from DPI had been that suggestions for change and improvements be solicited from concerned parties around the state. One way in which this charge could be addressed was through telephone interviews. The plan for telephone interviews was set up therefore to meet these two purposes. Before any telephone interviews were made, district administrators and directors of special education were informed in a letter from the primary researchers that this phase of the research was about to begin (For copy of the letter, see Appendix S).

Parent Interviews

Due to time constraints, the number of telephone contacts possible was limited. Nevertheless, it was decided that all parents who had nominated their children's records for review would be contacted. As indicated earlier in this report, 20 parents had made such nominations, but records for only 13 of these were received on time for information to be included in this report. For telephone interview purposes, however, it was possible to contact all 20 of these parents, and it was decided to make this a priority in the interview process. It must be recognized that this parent group volunteered their participation; thus information provided is subject to the limitations associated with any volunteer group.

Although the person making the telephone calls was also the one who had evaluated Parent Nominated records, the evaluator did not communicate to the parents any opinions regarding the decisions by M-teams in their child's case. Rather, she indicated only whether or not the records had been received and evaluated and, if so, that data which emerged from them, and which was relative to the research questions, would be included in the report.

The evaluator then asked parents for information regarding their child's current EEN or other special programming, and for suggestions for improvements which might be made in Wisconsin's LD identification procedures and services.

As a group, these parents were well-informed and had developed strong advocacy skills. They were articulate and eager to share their suggestions for improvements. Most found the interviews to be emotionally draining, however. Years of frustration and disappointment merged in their communications with anxiety for today and with fear of their child's future educational experiences. It is not possible to report in an objective manner the powerful emotions expressed by these parents.

All 20 of the Parent Nominated cases had been found ineligible for LD services in their districts, per the records presented by parents for review in this study. Four of these students have been found eligible for LD services, however, since those records were developed. One student was found eligible for CD services but, when parents refused CD services, an alternative program was developed for this student in regular education which actually includes some services from a learning disabilities teacher. Two students were found eligible for services in programs for the emotionally disturbed (ED), and one of these is presently being served in an ED program; the other, because the parent refused ED services, is being helped in school through Section 504. One student is enrolled in an Early Childhood Program and one is receiving Speech and Language plus Psychological services. One is receiving Specially Designed Physical Education (SDPE).

Seven students, including the one mentioned above, are presently receiving services in 504 programs. One is served in an At Risk Program. The remaining two parent-nominated students are presently receiving neither 504 nor any specialized regular education services, although one of these does attend an after school study group.

Four of the parents interviewed indicated that, with the services now being received, their child is doing well in school. Six others stated that their child is presently failing in school. Three of these students who are failing have experienced suspensions from school; one was "sent home" for five days (not formally suspended), and this parent believes that only when an attorney was hired to represent the child, was the district willing to negotiate the child's return. The second of the three students who have experienced suspensions was suspended from school for approximately three months; during these three months, the child was provided tutorial services in the local library for two hours each day. The parent of the third student who has been suspended fears that the district may be considering expelling her child from school; but on the other hand, that parent stated, she would almost welcome an expulsion, because interactions between the school and family have been so highly stressed. According to the parents interviewed, the remainder of the Parent Nominated students are presently "holding on" in school, but they are not thriving, and parents do not believe that the services provided are meeting their child's needs.

When asking parents for suggestions for changes and improvements in Wisconsin's identification procedures and services for LD children, no effort was made by the interviewer to elicit suggestions relative to the key research questions or to other issues included in this study. Based on their experiences with their own child, however, and on information learned through their contacts with attorneys and advocacy groups, some of the parents did have suggestions to make which are related to these issues. Such parents were well aware of the differences between federal and state LD criteria and spoke readily to these differences. Specifically, 11 parents stated that children in Wisconsin should be found eligible for LD services, if they had one area of discrepancy. One of these parents pointed out that reading problems generalize quickly to other areas in school, and specifically stated that a discrepancy in the area of reading alone should be considered a learning disability. Two parents stated that the 50% (significant discrepancy level) is unrealistic - that children should not have to fail that badly in school, before help is provided. One parent stated that, if a child qualifies for LD in one state, he should qualify in another; and five nominations, but records for only 13 of these were received on time for information to be included in this report. For telephone interview purposes, however, it was possible to contact all 20 of these parents, and it was decided to make this a priority in the interview process. It must be recognized that this parent group volunteered their participation; thus information provided is subject to the limitations associated with any volunteer group.

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All 20 of the Parent Nominated cases had been found ineligible for LD services in their districts, per the records presented by parents for review in this study. Four of these students have been found eligible for LD services, however, since those records were developed. One student was found eligible for CD services but, when parents refused CD services, an alternative program was developed for this student in regular education which actually includes some services from a learning disabilities teacher. Two students were found eligible for services in programs for the emotionally disturbed (ED), and one of these is presently being served in an ED program; the other, because the parent refused ED services, is being helped in school through Section 504. One student is enrolled in an Early Childhood Program and one is receiving Speech and Language plus Psychological services. One is receiving Specially Designed Physical Education (SDPE).

Seven students, including the one mentioned above, are presently receiving services in 504 programs. One is served in an At Risk Program. The remaining two parent-nominated students are presently receiving neither 504 nor any specialized regular education services, although one of these does attend an after school study group.

Four of the parents interviewed indicated that, with the services now being received, their child is doing well in school. Six others stated that their child is presently failing in school. Three of these students who are failing have experienced suspensions from school; one was "sent home" for five days (not formally suspended), and this parent believes that only when an attorney was hired to represent the child, was the district willing to negotiate the child's return. The second of the three students who have experienced suspensions was suspended from school for approximately three months; during these three months, the child was provided tutorial services in the local library for two hours each day. The parent of the third student who has been suspended fears that the district may be considering expelling her child from school; but on the other hand, that parent stated, she would almost welcome an expulsion, because interactions between the school and family have been so highly stressed. According to the parents interviewed, the remainder of the Parent Nominated students are presently "holding on" in school, but they are not thriving; and parents do not believe that the services provided are meeting their child's needs.

When asking parents for suggestions for changes and improvements in Wisconsin's identification procedures and services for LD children, no effort was made by the interviewer to elicit suggestions relative to the key research questions or to other issues included in this study. Based on their experiences with their own child, however, and on information learned through their contacts with attorneys and advocacy groups, some of the parents did have suggestions to make which are related to these issues. Such parents were well aware of the differences between federal and state LD criteria and spoke readily to these differences. Specifically, 11 parents stated that children in Wisconsin should be found eligible for LD services, if they had one area of discrepancy. One of these parents pointed out that reading problems generalize quickly to other areas in school, and specifically stated that a discrepancy in the area of reading alone should be considered a learning disability. Two parents stated that the 50% (significant discrepancy level) is unrealistic - that children should not have to fail that badly in school, before help is provided. One parent stated that, if a child qualifies for LD in one state, he should qualify in another; and five stated that Wisconsin should change its LD eligibility criteria in all areas which differ from federal requirements. One parent firmly stated that any district and/or state which refuses to comply with federal eligibility criteria should pay a financial penalty because, without such a consequence, noncompliance with federal law is likely to increase.

In addition to concerns regarding the requirement in Wisconsin for two areas of significant discrepancy and for the stringent (50%) level of discrepancy, parents also expressed concern regarding other LD identification procedures. IQ was one area mentioned in this regard, with two parents expressing concern for "grey area" students, who presently "fall into the cracks," being eligible neither for CD nor LD programs. Another parent insisted that, when motor, sensory, or communication impairments affect IQ scores, M-teams should be required to take these into account. Wisconsin could, this parent suggested, borrow language from its own rules regarding autism, and apply that language to LD identification. One parent indicated that M-teams should give more credibility to outside evaluations which document the existence of a learning disability.

Twelve of the 20 parents contacted took issue with the reliance of M-teams on formal test results. None of these parents believed that, in their own child's case, results of formal testing had indicated accurately their child's level of ability. Four of these same six parents emphasized that more attention should be given by M-teams to the child's actual level of performance on a daily basis, in the regular school environment.

Another area of great parental concern, according to these interviews, is regarding their children's IEPs. Two parents commented that IEPs should be written so that the child's needs are adequately met. Four stated that, once an IEP is written, it should be incumbent upon schools to deliver the services promised in the IEP. Two parents indicated that IEPs should include plans for appropriate management of their child's behaviors in school stating that, at present, behaviors which are the result of their child's handicapping condition are perceived as misbehaviors to be dealt with in a punitive manner. One parent indicated that the IEP should include necessary modifications for throughout the child's school day, including time spent in regular education. One parent indicated that all teachers (regular and special education alike) should be required to provide services according to the IEP; and one indicated that the child's regular education teacher should be required to attend the IEP meeting.

The parents interviewed were sensitive to the effects of failure on a child. Three parents discussed the importance of getting help in school to children while they are young. One parent succinctly stated the need to prevent "conditioning of the child into a failure syndrome." Two mentioned the predictability of "secondary handicaps," meaning that when early academic needs of the child are not met, ED will almost certainly develop. Three more parents made a closely related observation, pointing out that when young children are placed in ED programs, it is necessary that academic as well as behavioral services be provided.

Other suggestions were made regarding delivery of services. One parent stated that regular education teachers cannot be expected to meet all children's needs and, therefore, when a child requires alternative educational programming to be successful in school, pull-out services should be available. One parent stated that as many certified LD teachers as are needed to provide services for LD children, based on their needs, should be hired. Two stated that, in their children's integrated programs, the LD teachers were not able to get into regular education classes nearly enough to provide the needed support there.

A major area of concern, among parents interviewed, was regarding communication between themselves and their child's school. Eight of the 20 parents interviewed stated that school district administrative and special education personnel should inform themselves regarding other services available for students who do not meet the EEN eligibility criteria; and that this information should be shared willingly and accurately with parents. These parents also stated that school district personnel should be much more helpful than they are regarding assistance with making referrals and with timely completion of other procedures. One parent recommended that a parent-support person should be available, but that this should not be a school-district employee, given the tendency of district employees to treat parents in a patronizing manner. Another suggested the importance of education for parents in advocacy skills. Two parents wished for more awareness by their child's schools of pending failure, and for communication from school to parent when that is the case. One parent stated that districts should not be allowed to change a child's special education services without first informing the parent.

Teacher training and inservice were topics addressed by parents, with six parents recommending that each of these be required. Specifically, these parents stated that lack of awareness among regular education teachers of behaviors and learning problems related to handicapping conditions should not be tolerated. One of these parents pointed out the important role that counselors may play, in support for classroom teachers, and in assisting teachers to relate to children in a more sensitive manner.

Finally, two suggestions were made regarding M-team recommendations. One was that regular education teachers, when they do not agree with the majority of the M-team in an ineligibility decision, should not sign the report indicating that they do agree. Another was that, when the M-team makes recommendations for other services, for students found ineligible for LD, someone should take these recommendations seriously and provide follow-up to see that these services are provided.

Some of the suggestions for improvements made by the parents interviewed are actually pleas that the existing assumptions in the law become reality. Others constitute pleas that children in Wisconsin have the same opportunities for LD services as children in other states. For these parents, political and financial considerations lack relevance. These are insignificant and impersonal, and are seriously outweighed by concerns for a child whose self-esteem and whose future are threatened by lack of success in school.

Finally, to accurately report the responses by parents, mention is needed of the mental, emotional, and physical exhaustion described by 19 of the 20 respondents which, they said, has resulted from years of frustration in dealing with their child's schools. Only one parent reported that she had achieved a good working relationship with her child's school, and that the expertise she has developed regarding the needs of her own child and others like her own is appreciated by the school. All other parents reported that good working relationships had been impossible to attain. For parents of younger children, this is confusing and painful; parents of older children are outraged and express deep regret for opportunities lost and for a child who has been damaged. If such reactions had been expressed by parents in one or a few districts, the effect would be less compelling. But, as indicated above, 19 of 20 parents indicated this condition, and these were from 16 different school districts in the state of Wisconsin. Clearly, then, the most important recommendation by parents is that their concerns for their child should be treated with respect, and that schools should allow partnerships with parents to replace the existing adversarial climates which parents so profoundly regret.

Regular Education Teacher Interviews

As indicated elsewhere in this report, issues arose regarding participation in the M-team by regular education teachers, when data from the profile sheets was analyzed. These issues included the actual presence (or lack of presence) of regular education teachers at M-team meetings. They also included the apparent and unexpected reliance of M-teams on results of formal standardized tests.

To gain more information regarding the roles of regular education teachers at M-teams, and regarding the extent to which information developed by those teachers about students' daily performance is considered at M-teams, a telephone follow-up plan was developed.

It was decided that regular education teachers in low prevalence districts (See page 44 of this report for definition of low prevalence) constituted the group most likely to provide information regarding these issues. Included in records from the four low prevalence districts in this study were names of 36 regular education teachers who had functioned as members of M-teams in their districts, when LD had been suspected. A random sample of 10 of those teachers was drawn.

Before telephone contacts were made to regular education teachers, the building level principals of each was called. The purpose of the study was briefly explained to each principal, and the fact that a regular education teacher from his/her building had been included in a random sample was also explained. All of the principals contacted were comfortable with the information provided and agreed to inform the teacher that he/she had been selected. Principals provided information to the interviewer regarding best times for the teacher to be contacted, and a schedule for calling was developed (For follow-up questions, see Appendix T).

Each teacher was first asked to indicate approximately how many M-teams he/she attended each year. Next, teachers were asked to respond, using a 4-point rating scale of *strongly agree*, *agree*, *disagree*, or *strongly disagree*, to nine statements, each of which indicated one practice relative to the regular education teacher's role at the M-team or to the M-team processes as these were understood and experienced by the regular education teacher. Results of the telephone follow-up calls to regular education teachers are summarized in Table 33.

Analysis of items on the scale indicates that, regarding appropriate numbers of students being identified as eligible for LD services, two interviewees *strongly agreed*, four *agreed*, 3 *disagreed*, and one *strongly disagreed* with this statement. The mean response rating for this item was 2.3, indicating that in spite of the wide range of responses among individuals, the overall response by the group to this item was a somewhat weak *agree*.

Regarding Item 2 on the rating scale, that the classroom performance of students being M-teamed for suspected learning disabilities is given appropriate consideration when M-teams are determining functional levels of achievement, three regular education teachers *strongly agreed*, five *agreed* and two *disagreed*, with this statement. No teachers *strongly disagreed*. With a mean response rating of 1.9 on this item, it may be said that, in spite of diversity among interviews, overall there is agreement to this statement. This result seems at first to differ from the observations made by researchers based on analysis of items 47 and 48 on the profile sheet. That analysis had seemed to indicate an unexpected over-reliance on formal test scores, by M-teams, at the expense of information regarding classroom performance. Interviews with parents had also indicated a similar concern. To the extent that responses from regular education teachers, who were interviewed by telephone on this subject, are indicative of attitudes of regular education teachers in general toward this issue, it appears that regular education teachers do not perceive a problem in this area. Given the small size of this random selection of regular education teachers, however, any such attempt to generalize is risky.

Item 3 on the rating scale gauges teachers' opinions regarding the extent to which the results of standardized achievement tests match the teacher's own perceptions of a child's ability. One interviewee *strongly agreed* that such matches exist. Five *agreed* with the statement, three *disagreed*, and one *strongly disagreed*. Again, in spite of the spread of opinions among individuals on this item, the mean response of 2.4 indicates at least weak agreement with this issue by the interviewees as a whole. The same observations as those indicated for item two apply to this statement.

The fourth item on the rating scale probes the extent to which, in the experience of regular education teachers, M-teams consider a variety of information when determining if a child referred for learning disabilities is within or above the average range of intelligence. Three respondents *strongly agreed* with this statement; four *agreed*, two *disagreed*, and one *strongly* *disagreed* with this statement. As with all preceding items, regular education teachers differed with each other on this item; Nevertheless the overall response by the group, as indicated by the mean response rating of 2.1, is *agree*.

The intent of the fifth item was to find the extent to which regular education teachers consider IQ scores, if known, before deciding to refer a child for special education; that is, are students with known IQ scores below 90 likely to be referred for an LD evaluation in low prevalence districts in Wisconsin? Responses to this item varied as follows: no *teacher strongly agreed* that known IQ scores are a factor when considering LD referral; three teachers *agreed* that IQ scores do constitute such a factor; five teachers *disagreed*, and two *strongly disagreed* with the statement. The mean response rating of 2.9 on this item indicates near-consensus on this issue, thus implying that IQ scores known to be low do not influence regular education teachers' decisions regarding referral for learning disabilities evaluation. It should be noted, regarding this item, that four teachers commented that they do not have access to IQ scores before referral; one indicated that, when making a referral, it is not necessarily for LD, but may be for any EEN; and one indicated that "IQ scores don't have anything to do with learning disabilities-IQ can be high or low or average, and a child still can be LD."

Regarding Item 6 and the extent to which regular education teachers are knowledgeable regarding criteria for LD eligibility, one respondent *strongly agreed* with this statement; six *agreed*, one *disagreed*, and two strongly disagreed. Again, as with all other items, there was variance of opinion in response to this item; but the mean response rating of 2.4 indicates weak agreement overall, indicating that regular education teachers believe that they understand fairly well the identification criteria for the area of LD.

Table 33

Follow-up Telephone Calls Questions to Regular Education Teachers

	Responses Received per Item					
Questions Asked	**Strongly Agree**	**Agree**	**Disagree**	**Strongly Disagree**	**Mean**	**Standard Deviation**
Question 1. Appropriate numbers of students are being identified as eligible for LD	2	4	3	1	2.3	.95
Question 2. Classroom performance is given appropriate consideration when M-teams are considering student achievement.	3	5	2	0	1.9	.74
Question 3. Standardized achievement test results generally agree with the teacher's judgment of student ability.	1	5	3	1	2.4	.84
Question 4. M-teams consider a variety of information when making determinations about a child's intelligence.	3	4	2	1	2.1	.99
Question 5. Regular education teachers consider IQ scores when making referrals.	0	3	5	2	2.9	.74
Question 6. M-team members usually understand criteria that are commonly discussed at M-team meetings.	1	6	1	2	2.4	.97
Questions 7. M-teams take the regular education program modifications already made into consideration when determining eligibility.	3	5	1	0	1.8	.67
Question 8. M-teams take into consideration the further. modifications it is still reasonable to make, when deciding if a child needs LD services.	2	6	1	1	2.1	.88
Question 9. Regular education teachers feel like equal participants at M-team meetings.	3	5	1	1	2	.94

The extent to which M-teams, as perceived by regular education teachers, take into account modifications from the regular classroom when determining eligibility for LD programs, is the thrust of Item 7 on the regular education teacher rating scale. One teacher responded "don't know" to this item; three *strongly agreed* with the item; five *agreed*, and one *disagreed*. Thus there was more agreement among regular education teachers on this fact than on other items on the scale. The mean response rating of 1.8 indicates this plus the fact that, overall, the group interviewed for this purpose agreed that M-teams do consider regular education program modifications which have been made. The comments at Item 2 above are also appropriate for this item.

Item 8 on the rating scale is similar to Item 7, but it probes the extent to which further reasonable accommodations by regular education teachers are considered by M-teams, when determining if a child has a need for special education in the area of LD. Two teachers *strongly agreed* that M-teams do consider such modifications; six *agreed* with the statement, one *disagreed*, and one *strongly disagreed*. Again, in spite of scatter among responses, the overall response, as indicated by a mean response rating of 2.1, is *agree*.

The last item to which teachers were asked to respond was "regular education teachers feel like equal participants at M-team meetings." Three regular education teachers *strongly agreed* that they do feel like equal participants. Five *agreed* with the statement; one *disagreed* and one *strongly disagreed*. Overall, then, in spite of two ratings to the contrary, regular education teachers apparently *agree* (mean 2.0) that their role at the M-team is as significant as that of other members.

The results of these telephone follow-ups show, then, that as a group, regular education teachers are comfortable with their role at M-teams and believe that information they provide regarding modifications of regular education requirements is well-considered. Furthermore, they believe that results of standardized tests reflect their own perceptions of a child's ability, and they believe that appropriate numbers of students are being identified as LD. They understand the criteria for identification of LD. They do not generally refer for LD evaluation only those students with IQ scores known to be within the average range, and they assist in considering other sources of evidence that a child's intelligence is at least within the average range. Obviously, however, in spite of these conclusions based on mean response ratings for each item, there is diversity among respondents on every item on the scale. The overall conclusion, based on this diversity, is that opinions and practices vary among districts. Again, care must be taken not to overgeneralize results from a small sample of 10; but if these results do apply to other districts as well, then the only conclusion possible is that regular education teachers are reasonably satisfied with their role on M-teams, they believe their input is valued, and their referral practices are not influenced by knowledge of the students level of intellectual function. It would be expected that these perceptions will vary across the state.

School Psychologists Interviews

Items for telephone interviews of school psychologists grew out of the observation, when records were reviewed for this study, that in many cases documentation of M-team decision-making was inadequate or unclear. In 171 cases, record evaluators had marked on the red flag page of the profile sheet that this was the case. There were no explanations of why this was so, but one possibility seemed to be that M-teams in Wisconsin frequently do not document carefully the factors in their determinations for or against LD, because they are dissatisfied with the procedures required by Wisconsin rules, i.e. the requirements for determination of significant discrepancies between actual and expected achievement, and the use of the IQ score in determination of functional achievement levels.

In order to determine the attitudes of school psychologists toward these procedures, a random sample of 16 was drawn from the population of all school psychologists who had functioned as M-team members in the cases reviewed for this study. Attempts were made to contact each of these by telephone, and to set up appointments for times when a brief interview could be conducted. In the time allotted for this task, only 12 school psychologists were actually interviewed. Attitudes of the four psychologists who were unavailable for interview are not known. Therefore caution must be used when interpreting the results reported below.

The semi-structured interview guide used for this purpose included nine items or series of items, some of which were answered on a 4 point scale, and some of which required *Yes* or *No* responses (For a copy of this interview form, see Appendix U).

The first series of questions for school psychologists allowed them to rate on a 1 to 4 scale, with 1 being *strongly disagree* and 4 being strongly *agree*, their attitudes toward four statements. These statements and their mean ratings are indicated in Table 34. The mean response rating on Item 1a was 2.1, indicating overall disagreement with the statement that the discrepancy model should be completely eliminated from the processes for determinations of LD. Individual responses by school psychologists showed that three individuals *strongly disagreed* with this statement, six *disagreed*, two *agreed*, and one *strongly agreed.*

Table 34

Results of Question 1 from the Telephone Surveys of School Psychologists

Survey Question 1, Parts a-d	Mean Response Rating
(a) The significant discrepancy model should be completely eliminated	2.1
(b) The use of a formula for determining significant discrepancy should be eliminated	2.6
(c) One area of significant discrepancy should qualify a child for LD services	2.7
(d) No change is needed to the existing Wisconsin Rule	2.1

The mean response on Item 1b was 2.6, indicating mild agreement that the use of a formula for determination of significant discrepancies should be eliminated. Individual responses by psychologists showed that one psychologist *strongly disagreed* with this statement, five *disagreed*, and four *agreed*, and two *strongly agreed* that use of a formula should be discontinued.

On the question (1c) of a single area of significant discrepancy, the mean response rating was 2.7, again indicating mild agreement with the issue. However, three school psychologists *strongly agreed* with this statement, while two *strongly disagreed*, four *disagreed* and three *agreed*.

Regarding the statement (1d) that no change is needed to the existing Wisconsin rule regarding determination of significant discrepancies, the mean response rating of 2.1 indicates disagreement. On this item, four *strongly disagreed*, five *disagreed*, one *agreed*, and two *strongly agreed*.

The general conclusion regarding Items 1 a, b, c, d on the School Psychologist interview is that little consensus exists among psychologists on any of these issues; but that in general psychologists accept the concept of significant discrepancy, although they tend to support the elimination of a formula for determining significant discrepancy. Psychologists also tend towards supporting one area of significant discrepancy to qualify a child for LD services. Psychologists in

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The general conclusion regarding Items 1 a, b, c, d on the School Psychologist interview is that little consensus exists among psychologists on any of these issues; but that in general psychologists accept the concept of significant discrepancy, although they tend to support the elimination of a formula for determining significant discrepancy. Psychologists also tend towards supporting one area of significant discrepancy to qualify a child for LD services. Psychologists in this sample also apparently agree that some changes to Wisconsin's rules for determination of significant discrepancy are needed.

The second question posed during telephone interviews was regarding the usefulness of the Bond-Tinker formula. Two psychologists found the Bond-Tinker to be *least useful*, four found it *somewhat useful*, five found it *quite useful* and one found it *most useful* (See Table 35).

Table 35

Usefulness of Bond-Tinker (Results to Question 2)

	Least Useful	Somewhat Useful	Quite Useful	Most Useful	Mean Response Rating
School Psychologists' response to usefulness of Bond-Tinker	2	4	5	1	2.4

Those finding the Bond-Tinker *least* or only *somewhat useful* were asked to give reasons for their ratings. Among these reasons were:

* "Grade equivalents are inconsistent. We end up identifying the wrong kids. We fail to qualify kids with neurological signs and qualify instead those with low academic potential."

* "It doesn't allow M-teams to take a thorough look at the child to fully consider all aspects in placing."

* "A discrepancy is a discrepancy, so a number becomes irrelevant. If a discrepancy can be demonstrated, the number doesn't matter."

* "It's not statistically accurate."

* "The Bond-Tinker locks us into a numbers game. There are children for whom a score is not an accurate indicator of intelligence; some children with normal intelligence don't score 90 or above on an IQ test due to their LD, or due to a language disability which generalizes to a reading disability, which in turn may impact upon cognitive test results. These children, because of the numbers game, may not get LD services when Bond-Tinker is used."

Interviewees who indicated that the Bond-Tinker, in their judgment, is not useful were also asked to mention a preferred alternative. These responses included:

* Clinical judgment
* Curriculum-based measurements
* Something more psychometrically defensible than the expectancy-grade equivalent formula
* Standard scores based on age
* Absolute level of performance
* Regression formulas
* Give license to the school psychologist to be the assessor of intelligence. Do not allow others to negate the broadly based and thoroughly studied judgment of the school psychologist regarding a child's intelligence or potential for learning, or to replace it with a number. Do not allow the IQ number to be taken as the verbatim indicator of cognitive functioning and learning potential.

Regarding Question 3, *Is the Bond-Tinker equally useful for students at the elementary and secondary levels*, 11 school psychologists answered *No* and only 1 answered *Yes*. However, of the 11 responding *No*, 5 said that the Bond-Tinker was more useful at the elementary, and 6 said it was more useful at the secondary level.

Regarding usefulness for students who have repeated grades in school (Question 4), 10 psychologist answered *Yes*, and 2 answered *No* to that question. When asked for their reasons, answers included:

* "That year is just as important as any other."
* "It's no less useful for this group than for any other."
* "At least it allows consideration of the extra year of exposure to curriculum."
* "It helps see those who are continually having problems."
* "The formula works for repeaters of grades. The added year widens the discrepancy and helps in the numbers game."

Comments from the two psychologists who answered *No* to this question are:

* "It's hard to know to what extent retention actually affects performance, or how long an effect will be maintained."

* "The idea that this extra year means extra achievement is erroneous."

To Question 5: *Is the Bond-Tinker appropriate for students with IQ scores between 80 and 90*, one psychologist was unable to respond to the question without qualifiers, seven responded *Yes* and four responded *No*.

To the inquiry (Question 6) whether, in the experience of the individual being interviewed, the Bond-Tinker is used flexibly or with a precise cutoff point, six answered *precisely*, and six answered *flexibly*.

In response to Question 7, regarding whether or not the IQ should be a factor in determining LD eligibility, all 12 psychologists responded *Yes*. Reasons for their answers included:

* "To distinguish between LD and CD."

* "The IQ is one guide post for establishing average intellectual ability."

* "Sometimes IQ test results yield other [than score] important information."

* "It's one important piece."

* "It's important to attend to rates of learning as a factor of expected learning. Children who are delayed relative to peers are not necessarily delayed because they are LD."

* "We need to consider intellectual ability when determining LD. Otherwise we'd be opening it up to too many."

* Special Ed services must have a cut-off. If we try to serve too many, those who need services the most won't get them. Also, it's too expensive and causes resentment from other departments in the district."

* "The IQ isn't entirely precise, but it does give some idea of the rate at which a child can learn."

* "IQ distinguishes between CD and what we think of as LD. As long as LD means average intelligence, IQ is needed to help define that."

* "The definition of LD is that it is normal intelligence and involves potential for normal learning. This is what distinguishes the handicapping condition. Cognitive assessment (IQ testing) can provide a global look at a child. This needs to be done as part of looking at a language disability."

In response to Question 8 regarding likelihood that a student whose IQ is known to be below 80 will be referred for LD, six psychologists answered *least likely*, four answered *quite likely*, and two answered *very likely* (See Table 36).

In response to Question 9 regarding likelihood of LD referral for students with IQ scores known to be between 80 and 90, two psychologists answered *least likely*, four answered *somewhat likely*, four answered *quite likely*, and two answered *very likely* (See Table 36).

Table 36

Likelihood of Referral for Students with IQ Below 80 and Between 80 and 90 (Questions 8 and 9)

	Responses				
	Least Likely	Somewhat Likely	Quite Likely	Very Likely	Mean Response Rating
IQ < 80	6	0	4	2	2.2
IQ 80-90	2	4	4	2	2.5

Responses to Questions 2 through 9 on this interview, then, indicate a lack of consensus among psychologists similar to that expressed on the first series of questions. In response to every item, except regarding IQ as a factor in determining LD eligibility, responses included both *Yes* or *No*, or ranged from *strongly disagree* to *strongly agree*, or from *least useful* to *most useful*.

Regarding overall usefulness of the Bond-Tinker, responses clustered around *somewhat useful* and *quite useful*, indicating a general acceptance of that formula. Interestingly, although 11 of 12 psychologists interviewed stated that the Bond-Tinker is not equally useful at the elementary and the secondary levels, they were split almost equally in their judgments regarding at which level it is more useful, with five stating it is more useful at the elementary and six stating it is more useful at the secondary level. Those finding the formula less useful at the secondary level expressed concern regarding the gap that secondary level students must experience in order to qualify for LD. Essentially, the concern expressed here was regarding what, in this study, is called the 50% issue. The Bond-Tinker determines a significant level of discrepancy only when a student's functional achievement is 50% or less of his expected achievement. Such a 50% delay, for an average potential student at the 10th grade level, means that functional levels must be approximately at the 5th grade level for that student to receive LD services. Psychologists who found the Bond-Tinker less useful at the secondary level expressed concern that students are likely to experience failure in school long before delays reach this magnitude.

An area of near consensus among this sample group was regarding the use of the Bond-Tinker for students who have repeated grades in school. Here, 10 out of 12 who were interviewed stated that the formula does function in the interest of this particular group.

Seven psychologists stated that the Bond-Tinker is appropriate for use with students whose IQ scores are between 80 and 90. Of these, two indicated that, while they do not find the Bond-Tinker very useful, it is no less useful for students with lower IQs than it is for those with higher IQs. Thus, these psychologists did not wish their responses of *Yes* to this question to be interpreted as an endorsement of the formula. Among those who responded *No* to the question, concern was expressed that lower IQ scores, when factored into the Bond-Tinker, depress the level of significant discrepancy, making it more difficult for such students to be served in LD programs in spite of their need for assistance obviously being greater than that of students with higher IQs and higher potential for learning. One psychologist found the question too complex and to involve too many implications for a simple *Yes* or *No* answer.

Responses to Question 6, regarding precise or flexible use of the Bond-Tinker by M-teams when determining LD eligibility, are relevant to the 50% discrepancy issue. A dispute between the state of Wisconsin and OSEP has been the extent to which M-teams interpret Wisconsin rules flexibly and, hence, identify for LD services the same students as would be identified under federal criteria. Interestingly, at least in the districts where these psychologists are employed, half apply the Bond-Tinker precisely (i.e., establish and use a specific cutoff point) but half use it in the more flexible manner which would be consistent with federal interests in flexible application of identification criteria.

As indicated above, the only item to which all those interviewed agreed was the one regarding IQ as a factor for determining learning disability. Support for inclusion of IQ, however, was based on the importance of IQ testing, not on the basis of IQ scores, or even on the assumption that intelligence can be expressed as a score. IQ testing, psychologists emphasized, constitutes one of the ways, but a significant way, for cognitive functioning and potential for learning to be evaluated. It is "one piece" of a broad-based evaluation by which a determination of average ability and of potential for average learning, still prerequisite in Wisconsin to a diagnosis of learning disabilities, may be made. While such an evaluation is essential, in the professional judgments of those interviewed, reduction of the results of such evaluation to a numerical score is not considered defensible. Therefore, support for continued use of the IQ and for continued determination of normal cognitive functioning, by these psychologists, is not necessarily support for use of a single IQ score, or support for a formula which requires expression of intelligence as a single score.

Also of relevance to key issues for this study is the question regarding likelihood of referral for learning disabilities evaluation, in cases where it is already known that a child's IQ is below 80. On this question, as on most others, responses ranged from *least likely* to *very likely*. Nevertheless, it is interesting that, of the 12 psychologists interviewed, 6 indicated that referral of such a student for LD is *least likely*. Apparently then, in half of the districts in which these psychologists are employed, students with an IQ below 80 are not considered candidates for LD programs, and this is apparently the case in spite of indications by psychologists that the IQ score is only "one piece" of the determination of a student's cognitive ability or potential for normal functioning.

On the other hand, when students' IQ scores are known to be between 80 and 90, the likelihood of referral for LD increases. At this point, 8 of 12 psychologists stated that an LD referral is either *somewhat likely* or *quite likely*. Two more indicated that LD referral is *very likely*, even when it is already known that a student's IQ is between 80 and 90. Only two stated that referral for LD, for a student with an IQ known to be between 80 and 90, was *least likely*. This result and the result at Item 8, above, indicate psychologists' perceptions that, in their school districts, LD is associated with average intelligence, and intelligence is assumed to be measured by the IQ score. As their follow-up comments to other interview questions indicated, however, psychologists themselves are firm in the conviction that IQ scores are just one indicator of a child's intellectual ability.

Other Issues

Other issues arose upon analysis of the data, in addition to the key issues addressed in the study. These include Regular Education Teacher Not Present At M-team, Inadequate Documentation, Reliance Upon Formal Test Results, Determination of Need of Special Education, Eligibility For Learning Disability Programs for Transfer Students, and LD Eligibility in Minority Concentrated Schools.

Regular Education Teacher Not Present At M-team

Although classroom teachers are the largest referral source and are required by Wisconsin rules to be members of M-teams when LD is suspected, a total of 169 M-teams (15%) in the Random and Multiple Complaint groups did not include classroom teachers. Of these 169 cases in which classroom teachers were not M-team members (did not formally assess the needs of the referred student or prepare a written report for the M-team) neither did they attend the M-team in a consultation role, in 32 cases. That is to say, there were 137 M-teams (12.19%) with no classroom teachers present either as members or in supporting roles. This is true in spite of the fact that, in 38 of these 137 cases, the classroom teacher was the referral source.

Table 37 presents the total number of M-teams for each grade range, plus the frequency and percent of M-teams without regular education teachers for each of these ranges. Out of 57 M-teams involving preschool children suspected of LD, 52 of them did not include regular education teachers. However, 41 of these M-teams did include the EC:EEN teachers. M-teams at the K-5 level have the lowest percentage of regular education teachers not participating, (58 of 805; 7.2%). The rates for grades 6-8 and 9-12 are relatively higher (34/183; 18.58% and 25/79, 31.64% respectively).

Table 37

Frequency and Percent of M-teams without Regular Education Teachers by Grade Levels

Grade Range	Frequency/Total	Percent
Preschool	52/57	91.23%
K-5	58/805	7.20%
6-8	34/183	18.58%
9-12	25/79	31.64%
Total	169/1124	15.03%

The proportion of other participants at M-teams, where regular education teachers were not present, are presented in Table 38. School psychologists, LD teachers, Speech-Language teachers, social workers, and EC:EEN teachers are categories most frequently represented at M-team meetings.

Table 38

Frequency and Percent of Other Participants in M-teams without Regular Education Teachers (*n* = 169)

Other Participants	Frequency	Percent
Psychologist	163	96.45%
LD Teacher	131	77.51%
Speech Teacher	75	44.29%
Social Worker	50	29.59%
EC:EEN Teacher	38	22.49%
ED Teacher	24	14.20%
Occupational Therapist	21	12.43%
Counselor	17	10.06%
Physical Therapist	11	6.5%
Chapter 1 Teacher	9	4.73%
Principal	7	4.14%
Others	7	4.1%
ESL Teacher	5	2.96%
CD Teacher	4	2.37%

Inadequate Documentation

An issue which arose, upon review of the records submitted for this study, involves the extent to which M-teams did not clearly document their processes and decisions regarding eligibility criteria. In 168 of the 1124 Random Sample and Multiple Complaint cases studied, reviewers indicated in the red/green flag sections on the profile sheet their concern that such information was incomplete or that procedures had been poorly documented.

When records were reviewed and information was extracted regarding determination of average intellectual functioning, existence of significant discrepancies, areas of significant discrepancies, and procedures used by M-teams to arrive at these decisions, record evaluators looked first at the M-team report itself. This was considered appropriate, because determination of a handicapping condition and completion of procedures leading to that determination are the responsibility of all the M-team members functioning as a group. In cases where the information was not clearly documented on the M-team form, evaluators examined the reports written by each member of the M-team, in order to discern how the M-team had arrived at its decision. In some cases, the psychologist's report contained such information. In other cases, information was included in the LD teacher's report, which allowed evaluators to understand the basis on which decisions regarding eligibility criteria had been made. In other cases, however, even the M-team members' reports did not include complete information regarding these procedures. In cases like these, evaluators had no choice but to enter on the profile sheet the fact that some eligibility procedures were poorly documented or unclear.

Nothing in the records allowed the researchers to know why this was the case. One possibility seemed to be that, when considering a student who might not precisely meet Wisconsin's eligibility criteria but who clearly had a need for LD services, M-teams might be hard pressed to provide a rationale for eligibility within those criteria. However, analysis of the poorly documented records showed that, of the 168 such cases, 71 of the students had been offered LD services and 97 of them had not. These figures did not present a convincing case, therefore, either of flexibility or of inflexibility on the part of the M-team. Other possibilities, admittedly conjectural, came to mind and are briefly stated below.

Some possibility may exist that the M-team form itself is not helpful to M-team members, for purposes of clear documentation of eligibility procedures. While some districts included in this study have developed M-team forms which clearly break out LD eligibility criteria and provide specific spaces on the form for documentation of each of the steps in determination of eligibility, most districts have not. Without forms that cue appropriate completion, it is possible, in the M-team situation, that much of what is discussed regarding a child's needs and eligibility is not entered on the M-team report.

It is also possible that some M-teams do not believe that careful documentation of each step in the determination of LD eligibility is important, either because administrators do not require it, or because they find their combined subjective judgments, as members of the M-team, to be more critical to decision making. If the latter is the case, then the lack of clear documentation may in fact reflect the flexibility which, Wisconsin maintains, is implicit in its rules.

Another possibility is that M-team members may lack specific and detailed knowledge of eligibility criteria, or they may lack experience and expertise for documenting their methods and decisions relevant to those criteria. While these conditions would predictably result in poorly documented forms, it does not follow that interest in the child is thereby diminished, or that the effectiveness of such M-teams is diminished. Prior to the establishment of the M-team process, it could rarely be said that entire groups of professionals put aside all other considerations and convened, for an hour or more, to consider the needs of a particular child. With the M-team processes, that has become a common occurrence. It may be that M-team members find this time to consider and to communicate to be the most important component of the M-team process, and that documentation is far less important.

Gerber and Semmel (1984), in their review of M-teams from other states, suggested that members were more interested in finding ways to meet a child's needs than they were in establishing compliance with any criteria. Teachers in Wisconsin, as elsewhere, may be quite aware of the extent to which their skills and resources are inadequate to provide successful educational experiences for a challenging child, and their emphasis on this at M-teams may exceed their emphasis on documentation.

Reliance Upon Formal Tests Results

An important question motivating this study is the extent to which M-teams, when applying Wisconsin's rules for LD eligibility, identify the same students as those who would be identified under federal criteria. Since the language of Wisconsin's rules differs from federal language, the question becomes one of the extent to which Wisconsin's rules are interpreted flexibly or inflexibly during M-team processes. Closely related to the overall flexibility issue is the question of the extent to which M-teams make use of the flexibility which is already written into Wisconsin's rules.

One such area is regarding the determination of functional levels of achievement (the level at which a child actually functions, which is compared to his/her expected level of functioning). Rules state that, in determining functional levels, M-teams shall consider a combination of "formal and informal individualized tests, criterion-referenced measures, observations, and an analysis of classroom expectations in basic skill areas" (PI 11 (f) 2.a.ii). The rules further state that when a child's functional achievement approaches, but is not at or below 50% of expected achievement, that child may be considered to have met the academic functioning criterion, if he/she demonstrates variable performance among the subskills required for each of the areas of reading, writing, spelling, arithmetical reasoning or calculation, and if the child meets all other LD criteria (PI 11 (f) 2.a.ii). Several items were included on the profile sheet, to determine the extent to which M-teams comply with these stipulations in the rules. Items 38 through 43 probed the extent to which informal measures and information regarding classroom performance were gathered by the M-team and were, therefore, available for decision-making processes (See Profile Sheet, Appendix H). Item 44 on the profile sheet probed the extent to which M-teams used variability among subtest scores. Of primary interest, however, were Items 47 and 48 on the profile sheet, because these Items probed the extent to which M-teams actually made use of such information, when determining functional levels of achievement.

The data for Items 38 through 43 shows that 244 of the 1124 Random Sample and Multiple Complaint M-teams reviewed for this study used individualized informal tests and/or criterion measures within their assessment procedures. An analysis by the regular education teacher was included in the M-team's assessment, in 1006 of the 1124 cases reviewed. Nine hundred forty-eight cases included an observation of the child in a regular education setting, 173 included information from teachers in addition to those on the M-teams, and 21 included samples of the student's work.

Given the extent to which informal tests and other informal information was gathered by the M-teams, a high level of use of such information for actual decision-making would be expected. Researchers were unprepared, therefore, for results of Items 47 and 48 on the profile sheet, which indicated the extent to which this information was used for determining a child's functional levels of achievement and, hence, his/her significant (50%) discrepancy level.

In 875 of the 1124 Random Sample and Multiple Compalint group cases reviewed for this study, the functional achievement levels determined by M-teams were the same as the scores reported for that child on formal standardized tests. To all appearances, then, in these 875 cases, although informal information was available, either those measures had no impact or they were not considered by the M-teams when functional achievement levels were determined. Nothing in the data enabled the researchers to judge which of these was the case, or why this was so.

Analysis of Item 44 showed that M-teams considered variable performance among subtest scores 23 times, in order to satisfy the academic functioning criteria. This indicates that in 23 of the cases in this study, in which students were found eligible for LD programs, M-teams did use a flexible approach to satisfy the academic functioning criterion.

For comments by parents regarding dependence by M-teams on formal test results, see page 101 of this report. For comments by regular education teachers on related issues, see page 104 of this report.

How Was Need for Special Education Determined?

The determination of need for special education services is an important step in the eligibility process. Once a handicapping condition is identified, need for LD services must still be established. Of the 558 cases in this study in which eligibility was established, documentation available within the reports indicated that need for special education services was discussed 468 times. Three hundred seventy-four times, the M-team reported that the student's needs couldn't be met in the regular classroom. Item 60 on the profile sheet was used to record the statements by which M-teams indicated reasons for a child's need for special education. Specifically, these reasons included the need for more structure than can be provided in the regular classroom, different instructional materials, and more individualized or small group instruction. M-teams also identified characteristics of the child that make success in the regular classroom unlikely. These characteristics include severe learning deficits, low level reading or language ability, and greatly reduced functioning in all skill areas. Another 79 times, the M-team reports indicated that reasonable accommodations had already been made in regular education classrooms, but the student had continued to fail. It is unknown whether the remaining 90 cases in which no determination of need was established reflect inadequate documentation or no consideration of need by the M-team.

No need for services played a role in an additional 15 cases, after the existence of a learning disability had been determined. A *no need for services* was documented five times as the sole reason for not providing LD services. In 10 other cases, no need for services was documented as a contributing factor, along with at least one additional reason for denying LD eligibility.

LD Transfer Students

Thirty-four students, 24 (70.6%) from the Random Sample group and 10 (29.4%) from the Multiple Complaint group, transferred into the sample schools having been previously identified as LD within another state. Of these, 27 were found eligible for LD in Wisconsin schools, and seven were found ineligible.

Of the seven transfer students found to be ineligible, four (57.1%) were from the Random group and three (42.9%) were from the Multiple Complaint group. All four students from the Random group were declared ineligible because the student did not meet the significant discrepancy criteria. In one of these four instances, a judgment that current achievement was average in the area of written language was made by the classroom teacher. One of the ineligibility decisions came from the low prevalence group, and three came from the average prevalence group.

Of the three ineligible students from the Multiple Complaint group, two were declared ineligible on the basis of not meeting the significant discrepancy requirement, and one was declared ineligible solely on the basis of having only one area of significant discrepancy.

LD Eligibility Rate in Minority Concentrated Schools

Sixteen schools were identified as minority concentrated schools. Twelve of these were elementary schools and four were secondary. To be considered minority concentrated, a minority population of 65% or greater within the total school population was required. Actual minority rates in the 16 minority concentrated schools ranged from 68% to 99.9%. Because of limited available information, particularly in the Random Sample schools, minority subgroups were not delineated, nor was data separated by Random Sample versus Multiple Complaint districts.

Table 39 presents the LD eligibility rates of students in minority concentrated schools. The mean eligibility rate of the 16 schools is 51.6%. Placement rates varied from 0% in one high school to 100% in three elementary schools. Among the 12 elementary schools, the eligibility rate was 53.84%. This is slightly higher than the 53.1% in the overall Random Sample group and the 46% in the overall Multiple Complaint group. The sample size in the middle and high schools is too small to allow for meaningful conclusions. The overall eligibility rate (50.6%) from the minority concentrated schools appears to be consistent with the eligibility rate for the overall study samples.

Table 39

LD Eligibility Rate in Minority Concentrated Schools

Percentage of Minority Students		LD/Referral	Placement rate in Percentage
Elementary Schools	99.8	7/15	46.6
	80.5	3/3	100.0
	87.5	7/16	43.75
	89.0	6/10	60.0
	65.7	1/4	25.0
	99.9	7/7	100.0
	91.2	5/5	100.0
	91.8	5/12	41.6
	71.4	5/8	41.6
	93.4	3/6	50.0
	71.3	3/4	75.0
	98.9	4/14	28.57
Middle Schools	80.6	1/3	33.3
	88.8	5/8	62.5
High Schools	99.8	2/5	40
	68.0	0/4	0
Total		64/124	51.61

DISCUSSION

Prevalence Rates, Referral Rates, and Eligibility Rates

This study initially focused on prevalence rates within districts as a selection and analysis variable. Districts were selected and grouped according to the number of students within LD programs, in proportion to number of students in the school district. To reduce naturally occurring variability, particularly for small school districts, the prevalence rates for initial selection purposes were calculated across three school years. Thereafter, however, to be consistent with other data presented, all of which was from the 1994-1995 school year, data relative to prevalence rates was presented and interpreted for the 1994-1995 school year alone. Prevalence rates varied extensively across districts, ranging from a low of 2.48% to a high of 8.00% in Random Sample districts, and from a low of 3.21% to a high of 6.51% in Multiple Complaint districts. Some of the variance may be accounted for by school district size, the smaller the student enrollments the more likely that a biased outcome will be produced: this may explain why the Multiple Complaint group, which consists almost entirely of large school districts, shows less variability than the Random group. It is doubtful, however, that prevalence differences are accounted for by school size alone.

Regarding prevalence rates, it is noteworthy that high prevalence districts, as a whole group, have considerably higher referral and eligibility rates than other prevalence groups. These differences are explained, in part, by the fact that one of the four districts in the high prevalence group had more than twice the referral rate of other districts in the group; and by the fact that this same district also had a very high eligibility rate, when compared to other school districts in the high prevalence group. Even so, the other districts in the high prevalence group also had higher than average referral rates, and two had higher than average eligibility rates.

Low prevalence group data is less readily explained. Although the mean of the low prevalence group's referral rate is less than other group means, thus seeming to explain the reduced prevalence rate, that low score is greatly affected by one large school district having the lowest referral rate of all 25 districts in the Random Sample. Referral rates in the other three districts in the low prevalence group varied considerably, ranging from one district with the referral rate among the highest in the Random Sample to another whose referral rate was among the lowest in the sample. The low prevalence group had an eligibility rate just below the mean for all districts, but this too was influenced by the fact that one of the four districts in this group had one of the lowest eligibility rates among the 25 randomly selected districts.

The Multiple Complaint group was less variable than other groups across prevalence rate data, but showed extensive variability across referral and eligibility rates.

Research Question Number One

When evaluating children for learning disabilities eligibility do multidisciplinary-teams (M-teams) exclude children from consideration solely based upon intellectual functioning? If so, what are the intellectual functioning criteria and to what extent is there flexibility in the application of those criteria?

Of 322 students within the Random group who were not eligible for LD services, 10 (3.1%) were declared ineligible solely because their IQ scores were below 90. Although that number is comparatively small, it represents a considerably larger group when generalized to the population which this Random Sample represents. When viewed across the subgroups of the Random Sample, the picture is somewhat different. The average and high prevalence subgroups show eligibility rates of 2.1% and 2.9% respectively, both of which are somewhat less than the 3.1% mean for the total Random group. The rate for the low prevalence group is considerably higher, at 8.3%, apparently indicating that IQ as the only reason for determining ineligibility is a greater problem for this group.

A contrast is seen to ineligibility determinations, as reported above, when the number of eligibility determinations, in spite of all IQ scores below 90, is reviewed for the randomly selected group. Across the 365 students found eligible for LD services in the total Random group, 26 (7.1%) were declared eligible for LD services despite all their IQ scores being below 90. Because this number also constitutes a sample which can be generalized to the population it represents, the figure is more important than, at first, it appears to be.

When eligibility determinations are analyzed by subgroup, the results are similar to those for students found ineligible; that is, the average prevalence and high prevalence groups reflect rates close to the 7.1% mean for the total Random group. However, the low prevalence group mean, as it was for ineligibility cases, is considerably higher, at 14.3%.

It should be noted that, in most cases, both inflexible and flexible decisions regarding eligibility were made by the same school districts. The Random Sample includes one school district in which eligibility for LD services was denied to two students for the sole reason of below 90 IQ, and in which no eligibilities were determined for students with all IQ scores below

90. All other districts in which eligibility was denied for the sole reason of IQ scores below 90, however, also granted eligibility despite all IQ scores being less than 90, in at least one case. Conversely, all districts with zero instances of denial of eligibility based on IQ scores also had zero instances of eligibility in spite of IQ scores below 90. This may indicate that these school districts essentially ignored IQ criteria on both sides of the issue. Degree of flexibility or inflexibility varied from school district to school district.

In the Multiple Complaint group, only two of the five districts applied IQ criteria in an inflexible manner and, as with the randomly selected districts, these two districts were the only ones in which students were found eligible when all IQ scores were below 90.

These results are consistent with the contention by Ysseldyke, Christenson, Pianta and Algozzine (1983), that M-teams frequently ignore criteria and data, and with Gerber's (1984) conclusion that practical concerns drive eligibility decisions more than interest in implementing law.

Furthermore, inspection of narrow IQ ranges reflects flexibility in determining eligibility for LD services. Students with full-scale IQ scores between 80 and 89 (53.6% eligibility rate) were as likely to be declared eligible for LD services, in this study, as were students with full-scale IQ scores over 94, (51.6% eligibility rate), but not as likely as students with full-scale IQ scores between 90 and 94, who have a 65% eligibility rate. Even with full-scale IQ scores between 70 and 79, students had better than a 44% chance of being found eligible for LD services, although it must be noted that the frequency of referrals for students with lower IQ scores is considerably less than the frequency of referrals for students with higher IQ levels. In fact, the frequency of referrals is highest for students with IQ scores over 99, where the records reviewed for this study showed that 190 were made, and that an eligibility rate of 49% was established. The eligibility rate was highest, however, for students whose IQ scores were between 90 and 94, with 65% of those referred from this IQ range being found eligible by M-teams for LD services.

This result changes somewhat when data is presented which gives students the maximum benefit of a doubt as to intellectual ability and which also presents the worst case scenario for school system flexibility when determining LD eligibility across IQ ranges. When the students' highest obtained IQ score, obtained through multiple test administrations and/or by selecting the highest scale score from any IQ test, is registered, scores within categories tend to shift upward

Under this condition the eligibility results indicated by far the highest frequency, with 322 referred at above a 99 IQ score as compared with 190 referred from this category when full-scale scores are presented. The eligibility rate is highest within the 95 to 99 IQ score range compared to the 90 to 94 range, which had the highest eligibility rate when full-scale scores were registered. At the 85 to 89 IQ range, the eligibility rate was similar to the full-scale score analysis rate, i.e., 52% to 54% respectively; but below the 85 IQ score level, referrals and eligibilities reduced noticeably.

The Multiple Complaint districts' full-scale IQ scores were even more dramatically represented in the 80 to 89 ranges than was evident with the Random Sample group, with 56% eligibility rate across these two categories. But, when the highest IQ scores were represented, an even more obvious migration of scores upward occurred within this group. As a result, only 31% of the students within the 80 to 89 IQ score groups were declared eligible for LD services.

Regarding diminishing eligibility rates in lower IQ categories, it should be noted that, when IQ scores are reduced, eligibility rates diminish for reasons other than IQ per se. Lower IQ scores also lower the discrepancy cutoff level; thus the students with lower IQ scores must register increasingly lower achievement levels in order to meet the required discrepancy level. This occurs regardless of the discrepancy identification process used.

Another indicator is provided when Wisconsin eligibility rates, with full-scale IQ scores below 86, are compared with Iowa's eligibility rates. Iowa does not include an IQ score floor within its eligibility criteria. Nevertheless, Iowa identifies 14% of students referred as eligible for LD services with full-scale IQ scores below 86, whereas the Random Sample group in this study indicated a 20.82% eligibility for LD services in Wisconsin. The study's Multiple Complaint group registered 17.82% of the eligible LD students as being below the full-scale score of 86.

Another fairly direct comparison of different eligibility criteria emerges, when students transferring into Wisconsin from other states having different criteria are evaluated for eligibility. Within this study, 34 students with prior LD designations from other states were reviewed as part of the 1994-1995 study group. Of these 34, seven were declared ineligible for services in Wisconsin, and four of these were from the Random Sample group. A careful review of their records revealed that all four of these students were denied eligibility for failing to meet the significant discrepancy criteria. It should be noted that the M-team information reviewed for this study showed considerable flexibility when considering transfer students from out of state, whether they had a prior LD designation or not. The LD eligibility rate for out-of-state transfer students (79%) is uniformly higher than the average for the Random Sample (53%), and it appeared that M-teams made more flexible use of LD eligibility criteria for this group. Of the three LD transfers from the Multiple Complaint group, two were denied eligibility because of no significant discrepancy, and one was denied eligibility solely on the basis of having just one significant discrepancy area.

M-team records, then, have definitely identified cases where students are denied eligibility for LD services solely because of IQ scores below 90. But, in general, it appears that school systems from the Random Sample group, and from the Multiple Complaint group to some lesser extent, also show considerable flexibility in their use of IQ scores when making eligibility decisions.

The school psychologists expressed strong support for continued use of IQ as a factor in determining eligibility for LD, but their support was primarily based on the belief that understanding of ability level could be gleaned from the evaluation process of determining IQ, rather than focus on the IQ score alone. They were in general agreement that IQ scores are just one indicator of intellectual ability. When queried about the likelihood that a student with an IQ score below 80 would be referred for LD, respondents were evenly split in their opinions. Six of those interviewed indicated that it was likely, although they differed on the degree of support for the statement. Six others believed it to be least likely. When the IQ range was between 80 and 90, 10 psychologists indicated that referral was likely, though again differing on degree of support. Two indicated that it was least likely. School psychologists' conclusions regarding the likelihood of referral for learning disabilities, when the student's IQ score is known to be below 90, are consistent with other results. The IQ score, itself, is not generally the determining factor in a decision regarding referral for LD evaluation, although school psychologists are apparently aware of the difficulty in meeting the significant discrepancy cutoff, when IQ scores are particularly low.

Research Question Number Two

After M-teams determine that children meet the criteria for the handicapping condition of learning disabilities how do they determine whether the child needs special education?

Survey results from directors of special education indicated that a two-step process is utilized. First, a learning disability is confirmed, followed by an examination of the need for special education services. Respondents indicated that the need for services is based on an examination of such factors as success/failure of previous interventions and on degree of severity of the disability. Review of M-team records did support the directors' contentions. Of the 566 cases in which eligibility for LD services was agreed upon, 468 records revealed that need for services was discussed. Nevertheless, there were only five instances where a student was identified as eligible for LD programs but not in need of services. Several regular education survey respondents indicated that the provision of special education services automatically followed confirmation of a learning disability. The degree to which eligibility for LD programs versus need for services is taken seriously is unknown. It may be that M-teams have an insufficient base of knowledge to adequately make the differentiation.

Research Question Number Three

When evaluating children for learning disabilities how do M-teams determine the areas in which there must be a severe discrepancy?

Based upon a review of interactions between OSEP and DPI, the researchers focused their response on the issue of whether students in Wisconsin who are otherwise eligible for LD, are determined to be ineligible solely on the basis of having a single area of significant discrepancy. This issue evolves from the difference between Wisconsin and federal eligibility criteria, in that Wisconsin's criteria require two areas of significant discrepancy (other than math plus a second demonstrable discrepancy), whereas the federal criteria require only one area of significant discrepancy.

The relationship between flexible versus inflexible eligibility decisions, when there is only one area of significant discrepancy, is not as clear as it was for IQ scores below 90. There were 15 students within the random groups whose eligibility was denied based on the student having only a single discrepancy area. Three of these occurred within the low prevalence group, 10 within the average prevalence group, and 2 within the high prevalence group. In relation to the total number found ineligible for services from each group, the percents ineligible for the sole reason of one single area of significant discrepancy were: total Random Sample group, 4.7%; low prevalence group, 6.3%; average prevalence group, 4.2%; and high prevalence group, 5.7%.

In contrast, these same groups showed flexibility when deciding eligibility, in that they recommended eligibility for 8.8%, 8.2%, 5.3%, and 21.7%, respectively, for a total of 32 students. Frequently, however, the school district within a subgroup that was restrictive was not the district that also demonstrated flexibility. The flexibility cases occurred within only five of the nine school districts in which students were determined ineligible for LD services, based solely on having just one discrepancy area. Although, on average, school districts from all random subgroups were considerably more flexible than restrictive when making eligibility decisions for students with a single area of significant discrepancy, individual districts were idiosyncratic as to flexible or restrictive practices. Whereas, with IQ, it appeared that districts simply ignored the criteria, in general when a single area of significant discrepancy is the issue it appears that districts either ignore or attend to Wisconsin's requirement for two areas of significant discrepancy on a more idiosyncratic basis.

Multiple Complaint districts were more inclined to identify students with one area of significant discrepancy as being ineligible (14 of 236, 5.9%) than eligible (6 of 201, 3%). In the Multiple Complaint group, three districts applied the one significant discrepancy criterion in an inflexible manner. Two of these districts had fewer flexible than inflexible applications of the criterion, and one group which applied the criterion inflexibly had no instances of flexible application of that criterion. Overall there were more inflexible than flexible applications.

In addition to the 67 cases mentioned above, from the Random Sample and the Multiple Complaint groups, 1 case of ineligibility due solely to a single area of discrepancy was identified through parent nominations. Of the 68 times, then, in which a student could have been identified as ineligible based on the sole reason of one area of significant discrepancy, M-teams made recommendations for eligibility 38 times; thus 56% of these decisions were for eligibility, 44% for ineligibility.

Another area of concern exists when IQ scores below 90 and a single area of significant discrepancy are combined as reasons for declaring a student to be ineligible for LD services. Two students in the Random Sample were ineligible for these combined reasons. Both students were within the low prevalence Random subgroup. Conversely, however, five students were declared eligible for LD services, despite having all IQ scores below 90 and only one area of significant discrepancy. Great disparity existed across districts regarding this restrictive practice. There were no instances of both restrictive and flexible practice by the same district. Two districts each declared one student ineligible for services, and four districts each declared one or two students eligible, despite the students having an IQ score below 90 and only a single area of significant discrepancy. As with the single significant discrepancy area as the sole reason for ineligibility, although the frequency level is low, this once again appears to be a case of schools selectively ignoring or attending to Wisconsin's criteria.

Five students from the Random group and six students from the Multiple Complaint group who were declared ineligible for LD services, seemingly because they met no eligibility criterion, did in fact meet the federal eligibility requirements based on a single area of significant discrepancy when the federal subcategories were considered.

The reasons for these ineligibility decisions are difficult to understand and categorize. Throughout this study, the researchers have attempted to understand and identify the M-team process and the variables that led the M-team to its eligibility or ineligibility decision. For example, when the M-team made an ineligibility decision, the researchers examined the M-team report and other documentation to ascertain, as far as possible, the reasons for that M-team's ineligibility decision. If the referred student clearly had a single area of discrepancy, but there were no other identifiable reasons for an ineligibility decision, it appeared reasonable to conclude the student was denied eligibility because he/she did not possess a second area of discrepancy. Thus, it was also reasonable for researchers to conclude that the M-team's decision for ineligibility was based on adherence to the state requirement of two or more areas of significant discrepancy.

But when an M-team concludes that a student is ineligible for LD services when a federal subarea (e.g. reading comprehension) of a discrepancy category is violated, the reason for violation is not so clear. Does that decision indicate insufficient knowledge of federal versus state criteria, or does it reflect the M-team's adherence to Wisconsin's criterion of two or more areas of discrepancy? The records show that when these 11 M-team decisions for ineligibility were made, the members believed the student did not meet the significant discrepancy criterion in any area, and therefore concluded the student was ineligible for placement. Given the federal subcategories of achievement, these M-teams violated federal requirements; but was that violation driven by Wisconsin's stipulation of two or more significant discrepancy areas, or was it driven by inadequate knowledge or consideration of the federal achievement categories in general? The records do not provide an answer to this question.

Research Question Number Four

> *Do parents, teachers, and administrators have suggestions for ways in which the Wisconsin learning disability (LD) criteria and identification procedures can be improved? If so, what are their suggestions?*

M-team participants and special education directors participating in the survey recommended the following changes in Wisconsin's LD criteria:

1. Replace the Bond-Tinker formula and 50% discrepancy criteria with a standard score difference model.
2. Allow the use of one area of discrepancy rather than two.
3. Allow more flexibility in the identification of LD in younger students (grades three and below).

A random sample of 12 school psychologists contacted through telephone interviews generally indicated that changes in Wisconsin's existing criteria would be desirable, although they did not believe that the significant discrepancy model should be eliminated.

Although they were far from unanimous in their opinions, their responses could be characterized as weak agreement that Wisconsin's discrepancy formula and its requirement of two discrepancy areas should be eliminated. Although the school psychologists interviewed indicated a general discontent with the formula, they also indicated that it had varying degrees of usefulness. School psychologists recognized that a discrepancy between ability and performance is an important part of identifying eligibility for LD, and that the Bond-Tinker formula can play a role in identifying that discrepancy. Nevertheless, virtually all respondents indicated other processes for determining discrepancies, which they believe to be superior to the Bond-Tinker, or which should, at least, be used to supplement the Bond-Tinker.

When asked more specifically about the usefulness of the Bond-Tinker, psychologists expressed different viewpoints. For example, although 11 of 12 respondents indicated that the Bond-Tinker formula was not equally useful for elementary versus secondary level students, 5 of these respondents indicated it was most useful for elementary level, and the other 6 said it was most useful at the secondary level. Half of the school psychologists interviewed indicated the Bond-Tinker formula was generally used with precise cutoff points; the other half indicated it was used flexibly.

Parents also questioned differences between state and federal eligibility criteria, expressing particular concern about Wisconsin's requirement of two significant discrepancy areas and its 50% cutoff level, believing each of these requirements is too restrictive. Parents also expressed concern about "gray area" children who frequently have no source for the assistance that is necessary for their success. Although it is not the focus of this study, parents frequently indicated problems with IEPs being inadequate, unfulfilled or, when a child is placed in a regular classroom, ignored. Parents were aware of the desirability of assistance at a young age and lamented the inability to get assistance before problems magnified. Perhaps the greatest concern of parents focused on inadequate communication between home and school. Parents indicated that school personnel should know about alternative options for children who do not meet EEN eligibility criteria, and should willingly share this information with parents. Additionally, school district personnel should be more helpful throughout the referral and placement process. Other parents expressed much concern about regular education teachers' lack of knowledge about instruction and management of children who are having difficulties. Those parents interviewed expressed most concern about the adversarial nature of the relationship between school and home. They frequently indicated that an improved relationship must be developed to serve the needs of all students.

There is considerable variance of opinion concerning Wisconsin's LD criteria. Generally, however, professionals surveyed indicated strong support for changing the Bond-Tinker formula to a standard score difference model, and at least moderate support for establishing more uniformity between state and federal criteria. Professionals, but particularly parents, pleaded for more and better services within and outside of special education. Parents shared concerns with professionals regarding inadequate discrepancy formula and criteria. But, of equal concern to parents, is what they perceive as disinterest in the child who is found ineligible for services and who is unable to succeed without adequate assistance, an assistance that is too frequently unavailable.

Other Issues

Other issues, in addition to the key issues addressed in this study, are discussed below. These include responses made by a random selection of regular education teachers to questions regarding their role at M-teams, and the issue of the 50% significant discrepancy level; regular education teachers' attendance at M-teams, inadequate documentation of M-team processes, and frequency of identification of minority students for learning disabilities programs.

Regular Education Teachers' Responses

A sample of regular education teachers was interviewed near the end of the study. The group selected was chosen as a random sample of low prevalence school district teachers. It was believed these teachers might be the most dissatisfied with the LD identification processes, given they are employed by districts that place fewer students in special education programs. Somewhat surprisingly, these teachers were generally satisfied that appropriate numbers of students were being identified as eligible for learning disability services, that the student's performance in the regular classroom was being adequately considered by M-teams, that M-teams consider a variety of information when making judgments about intellectual potential, and that regular education teachers are treated as equals when participating on M-teams. Additionally, these regular education teachers generally agreed that IQ test scores are not considered before referring a child for LD eligibility consideration. This last issue was of concern because it has been suggested that regular education teachers may refrain from making referrals of students with low IQ scores, if known, because such a student's chance for an affirmative eligibility decision is greatly reduced. Data from regular education teacher interviews did not support this contention, although the survey of school psychologists from different school districts had provided some support for this contention, when IQ scores are below 80. Also, the regular education teacher sample indicated that M-teams consider attempts by the classroom teacher to modify regular education programs, when making eligibility decisions; and that such accommodations are considered when determining a need for special education services. Although the 10 regular education participants were selected randomly and were a 28% sample of all regular education teachers who participated as members of low prevalence district's M-teams, generalizability of results from their interviews is limited, because the number in the sample is small and subjects were only selected from one subgroup.

Fifty Percent Discrepancy

Twenty-two (6.8%) of the 322 students from the Random group had one or two areas of achievement between 51% and 60% of expected achievement.

Appropriate significant discrepancy processes and criteria are probably the most written about issue in the LD placement literature. Wisconsin's criteria of 50% discrepancy, based on the Bond-Tinker formula, is generally considered to be a rigorous discrepancy criteria, particularly if it is applied inflexibly. Examination of Wisconsin data determined that 22 students (6.8%) from the Random Sample group and 3 students (1.5%) from the Multiple Complaint districts were found ineligible when their discrepancy levels were between 51% and 60% of expected achievement levels. To investigate the flexibility employed by Wisconsin school districts, the researchers explored the number and proportion of students with actual achievement between 51% and 60% of expected level who were nevertheless found eligible for LD services. To acquire information about eligibility, a randomly selected group of 58 students was studied. Seventeen of the 58 students were found eligible for LD programs, even though their actual achievement scores were between 51% and 60% of the expected achievement. Of these 17 students, 14 were from the Random Sample group and 3 were from the Multiple Complaint group. These numbers, when extrapolated to all students found eligible among the 365 Random Sample subjects and to the 201 Multiple Complaint subjects who were eligible, indicate that approximately 88 Random Sample students and 10 Multiple Complaint subjects would be eligible for LD placement, despite achievement scores above the 50% cutoff level. This inclination to find students eligible, even when they are above the 50% cutoff level, represents flexible identification practices when determining eligibility.

Regular Education Teachers' Attendance at M-teams

Although regular education teachers are required to be included as members of LD M-teams, the study results indicated that, 15% of the time, M-teams did not include a regular education teacher. This compared to 24% nonattendance of regular education teachers in the state of Iowa (Kavale & Reese, 1992). The frequency of nonattendance varied by grade level with high rates of nonattendance at the preschool level, grades 6-8, and grades 9-12. Over 70% of all referrals occurred between kindergarten and grade 5. Of the 805 referrals between Kindergarten and grade 5, 58 cases of regular education teacher nonattendance occurred, for a nonattendance rate of 7.2%, which is less than half the average. An unknown factor is the number of M-team meetings in which a representative replaced the regular education teacher, i.e. each member of the M-team shall attend the meetings or shall be represented by a person who is knowledgeable regarding the child and the member's evaluation and findings (PI 11.04). The federal regulations also allow for a replacement under limited conditions, i.e., The federal regulations allow for a replacement if the child does not have a regular teacher, i.e., "If the child does not have a regular teacher, a regular classroom teacher qualified to teach a child of his or her age" (300.540), or for children less than school age, i.e., "For a child of less than school age, an individual qualified by the SEA to teach a child of his or her age" (300.540). Although a very high percent of nonattendance occurred at the preschool level in the current study (52 of 57 M-teams) it is unknown if a person "knowledgeable about the child and the evaluation and findings" was present to represent the missing regular education teacher at any of the M-team meetings. Because of this void in information, the magnitude and breadth of the problem cannot be determined.

Inadequate Documentation

In 168 of the 1137 cases reviewed for this study, records evaluators found that some procedures and/or decisions made by M-teams, in determination of eligibility for LD services, were poorly documented. Nothing in the records allowed the evaluators to determine why this was the case. Analysis of eligible/ineligible cases did not support an early hypothesis that inadequate documentation might be associated with flexibility by M-teams in determining eligibility decisions. Other hypotheses regarding inadequate documentation may be considered, but there is as yet no basis for conclusions on any of these. Possibilities, however, may include that M-Team forms do not lend themselves well to full documentation of each step in the determination of eligibility; or that some M-teams do not consider full documentation to be a high priority. If the latter is the case, this may indicate that M-team members in Wisconsin resemble those in other studies, where it was observed that serving children was a high priority, but establishing compliance with a particular set of criteria was not.

Minority Concentrated Schools

Identification of the frequency of minority subjects was impossible from information available for this study. To explore minority eligibility rates, schools were identified, each having a minority prevalence rate of 65% or greater. These 16 schools were selected from a limited proportion of the sample and, therefore, results cannot be generalized. Also, the data for minority groups was combined, and this amalgamation of data across minority types further limits generalizability of results for, as the literature generally suggests, eligibility outcomes may differ by minority type.

Results indicate that 51.6% of the students referred from the high minority concentration schools were found eligible for LD (Most of the referrals identified in this study were from 12 high minority elementary schools). The mean eligibility rate for these schools is 53.84%. Although, the eligibility rate for these high minority concentrated schools approximates the mean eligibility rate for all Random Sample group students in this study (53.1%), due to high eligibility variance among schools, caution must be observed in drawing conclusions from these results.

Conclusions

In conclusion, current evidence seems to indicate that, although documented cases are clearly evident of ineligibility decisions based solely on an IQ score below 90, solely on a single area of significant discrepancy, or on a combination of the two, flexible application of these criteria is more generally in evidence. Usually, school districts apply LD identification criteria flexibly, but the same districts may also conduct restrictive practices. This is, in fact, almost universally the outcome, when restrictive use of IQ is seen. Other times, districts may use either restrictive or flexible practices in applying a criterion, but not both. This outcome was fairly common when a single area of significant discrepancy was at issue. Regardless of the reasons for restrictive practices, efforts should be made to alter the outcomes so that, to the extent possible, all children eligible and in need of LD program services are able to receive those services.

Limitations

The study was conducted under severe time limits. The researchers were first approached with the request to participate in September 1996, and the final report was sent to the steering committee on March 27, 1996. This time constraint influenced the content of the document right up to the printing of the final report. Written and oral reports to the steering committee, OSEP, and DPI were required on a monthly basis throughout the time of the study. This reporting required a significant time commitment in addition to the time demands inherent in the study.

Although the co-principal investigators reside at the same university campus, the research consultant's employing university is located on the opposite side of the state. Most communication was by FAX or telephone, although four face-to-face meetings were conducted. Because the volume of student information was so large, it was necessary to house it all on one campus. The problem of exchanging information was partly resolved by differentiating responsibility. The co-principal investigators assumed primary responsibility for research questions number one and three; the research consultant assumed primary responsibility for research questions number two and four. Research questions two and four were answered, primarily, through follow up surveys to school district administrators and other school district personnel.

Except for the follow-up telephone interviews, all student records were provided by the participating school districts. Although district administrators provided all information requested, the quality and completeness of the documentation by M-teams varied from district to district, and sometimes from case to case. The researchers' interpretation of the eligibility process was generally limited to the information provided in the M-team reports. Some follow-up telephone interviews were initiated to check the validity of the M-team documentation. Although no blatant violations were revealed through these follow-up conversations, the utility of these calls was limited by time constraints that allowed for relatively small samples of information.

References

Algozzine, B., Christenson, S., & Ysseldyke, J. (1982). Probabilities associated with the referral to placement process. *Teacher Education & Special Education, 5*, 19-23.

Baldwin, R. S., & Vaughn, S. (1989). Why Siegel's Arguments Are irrelevant to the Definition of Learning Disabilities. *Journal of Learning Disabilities, 22*, 513, 520.

Barona, A., & Faykus, S. (1992). Differential effects of sociocultural variables on special education eligibility categories. *Journal of School Psychology, 29*, 313-320.

Barona, A., Barona, M. S., & Faykus, S. P. (1993). The simultaneous effects of sociocultural variables and WISC-R factors on MR, LD, and non placement of ethnic minorities in special education. *Education and Training in Mental Retardation*, 66-74.

Braden, J. P. (1987). A comparison of regression and standard score discrepancy methods for learning disabilities identification: Effects on racial *representation. Journal of School Psychology, 25*, 293-302.

Braden, J. P. (1995). Review of the Wechsler Intelligence Scale for Children, Third Edition. In J. C. Conoley & J. C. Impara (Eds.), The twelfth mental measurements yearbook (pp. 1098-1103). Lincoln, NE: Buros Institute of Mental Measurements of the University of Nebraska-Lincoln.

Bryan, T. (1989). IQ and Learning Disabilities: A Perspective From Research on Social Factors. *Journal of Learning Disabilities, 22*, 480-481.

Chinn, P. C., & Hughes, S. (1987). Representation of minority students in special education classes. *Remedial and Special Education, 8*, 41-46.

Clarizio, H., & Bernard, R. (1981). Recategorized WISC-R scores of learning disabled children and differential diagnosis. *Psychology in the Schools, 18*, 5-12.

Clarizio, H. F., & Phillips, S. E. (1986). Sex bias in the diagnosis of learning disabled students. *Psychology in the Schools, 23*, 44-52.

Cole, P. G. (1993). A critical analysis of Siegel's case for revision of the learning disability construct. International Journal of Disability, *Development and Education, 40*, 5-21.

Collins, R., & Camblin, L. D. (1993). The politics and science of learning disability classification: Implications for Black children. *Contemporary Education, 54*, 113-118.

Cone, T. E., & Wilson, L. R. (1981). Quantifying a severe discrepancy: A critical analysis. *Learning Disability Quarterly, 4*, 163-174.

Council for Learning Disabilities (1986). Use of discrepancy formulas in the identification of learning disabled individuals.

Dangel, H. L., & Ensminger, E. E. (1988). The use of a discrepancy formula with LD students. *Learning Disabilities Focus, 4*, 24-31.

Dent, H., Mendocal, A., Pierce, W., & West, G. (1991). The San Francisco Public Schools experience with IQ testing. In A. G. Millard (Ed.), Testing African American Students: Special Re-issue of the Negro Educational Review (pp. 146- 162). Morristown, NJ: Aaron Press.

Evans, L. D. (1992). A comparison of the impact of regression and simple difference discrepancy models on identification rates. *Journal of School Psychology, 30*, 17-29.

Finlan, T. G. (1992). Do state methods of quantifying a severe discrepancy result in fewer students with learning disabilities? *Learning Disabilities Quarterly*, *15*, 129-134.

Frankenberger, W., & Fronzaglio, K. (1991). A review of states' criteria and procedures for identifying children with learning disabilities. *Journal of Learning Disabilities*, *24*, 495-500.

Frankenberger, W., & Harper, J. (1987). States' criteria and procedures for identifying learning disabled children: A comparison of 1981-82 and 1985-86 guidelines. *Journal of Learning Disabilities*, *20*, 118-121.

Fugate, D. J., Clarizio, H. F., & Phillips, S. E. (1993). Referral-to-placement ratio: A finding in need of reassessment? *Journal of Learning Disabilities*, *26*, 413-416.

Furlong, M. (1988). Psychometric factors affecting multi-disciplinary team identification of learning disabled children. *Learning Disability Quarterly*, *8*, 37-44.

Furlong, M., & Yanagida, E. (1985). An examination of an implementation of the simple difference score distribution model in learning disability identification. *Psychology in the Schools*, *25*, 132-143.

Gerber, M. M. (1984). Is Congress getting the full story? *Exceptional Children*, *51*, 209-224.

Gerber, M. M., & Semmel, M. I. (1984). Teacher as imperfect test: Reconceptualizing the referral process. *Educational Psychologist*, *19*, 137-148.

Graham, S., & Harris, K. (1989). The Relevance of IQ in the Determination of Learning Disabilities: Abandoning scores as Decision Makers. *Journal of Learning Disabilities, 22*, 500-503.

Hallahan, D. P., Keller, C. E., & Ball, D. W. (1986). A comparison of prevalence rate variability from state to state for each of the categories of special education. Remedial and *Special Education*, *7*, 8-14.

Harry, B. (1994). The Disproportionate Representation of Minority Students in Special Education: Theories and Recommendations. Alexandria, VA: National Association of State Directors of Special Education, Inc.

Hoff, D. (1992, October 19). OCR writing plan to check minority special education placement. *Educational Daily*, *25*, pp. 1, 2.

Illinois State Board of Education (1991). The role of ethnicity in special education identification and educational setting placement.

Johnson, M. J. (1991). American Indians and Alaska Natives with Disabilities. Department of Education, Washington, DC. Indian Nations At Risk Task Force.

Kavale, K. A., & Reese, J. H. (1992). The character of learning disabilities: An Iowa profile. *Learning Disability Quarterly*, *15*, 74-94.

Lyon, G. R. (1989). IQ Is Irrelevant to the Definition of Learning Disabilities: A Position in Search of Logic and Data. *Journal of Learning Disabilities*, *22*, 504-507, 512.

McLeskey, J., & Waldron, N. L. (1990). The identification and characteristics of students with learning disabilities in Indiana. *Learning Disabilities Research*, *5*, 72-78.

Mercer, C. D., King-Sears, P., & Mercer, A. R. (1990). Learning disability definitions and criteria used by state education departments. *Learning Disability Quarterly*, *13*, 141-152.

Meyen, E. (1989). Let's Not Confuse Test Scores with the Substance of the Discrepancy Model. Journal of Learning Disabilities, 22, 482-483.

Moecker, D. (1992). Special education decision processes for Anglo and Hispanic students. ERIC Document Reproduction Service No. ED 346 704.

Osgood, R. L. (1984). Intelligence testing and the field of learning disabilities: A historical and critical perspective. *Learning Disability Quarterly*, *7*, 343-348.

Payette, K. A., Clarizio, H. F. (1994). Discrepant team decisions: The effects of race, gender, achievement, and IQ on LD eligibility. *Psychology in the Schools*, *31*, 40-48.

Payette, K. A., Clarizio, H. F., Phillips, S. E., & Bennett, D. E. (1995). Effects of simple and regressed discrepancy models and cutoffs on severe discrepancy determination. *Psychology in the Schools*, *32*, 93-102.

Piotrowski, R. J., & Siegel, D. J. (1986). The IQ of learning disability samples: A Reexamination. *Journal of Learning Disabilities*, *19*, 492-493.

Proposed new LD criteria. (Summer 1995). *DLD Times*, pp. 5, 8.

Reschly, D. J. (1991). The effects of placement litigation on psychological and education classification. *Diagnostique*, *17*, 6-20.

Reynolds, C. R. (1992). Two key concepts in the diagnosis of learning disabilities and habilitation of learning. *Learning Disability Quarterly*, *15*, 2-12.

Shepard, L. A., & Smith, M. L. (1983). An evaluation of the identification of learning disabled students in Colorado. *Learning Disability Quarterly*, *6*, 115-127.

Siegel, L. S. (1989a). IQ Is Irrelevant to the Definition of Learning Disabilities. *Journal of Learning Disabilities*, *22*, 469-478.

Siegel, L. S. (1989b). Why we do not need intelligence Test Scores in the Definition and Analyses of Learning Disabilities. *Journal of Learning Disabilities*, *22*, 514-518.

Stanovich, K. E. (1989). Has the Learning Disabilities Field Lost Its Intelligence. *Journal of Learning Disabilities*, *22*, 487-492.

Vergun, P. B., & Chambers, J. G. (1995). A Case Study of "Supported Education" in Oregon: Resource Implications of Inclusion. Palo Alto, CA: Center for Special Education Finance.

Wong, B. (1989a). Is IQ necessary in the definition of Learning Disabilities? *Journal of Learning Disabilities*, *22*, 468.

Wong, B. (1989b). Concluding Comments on the Special Series on the Place of IQ in Defining Learning Disabilities. *Journal of Learning Disabilities*, *22*, 519-520.

Woolman, I. S., & DiSanto, D. (1990). Operationalizing A Definition: Rhode Island's Learning Disabilities Identification Process. Providence, RI: Department of Education.

Ysseldyke, J., Christenson, S., Pianta, B., & Algozzine, B. (1983). An Analysis of teachers' reasons and desired outcomes for students referred for psychoeducational assessment. *Journal of Psychoeducational Assessment*, *1*, 73-83.

Ysseldyke, J. E., Algozzine, B., Richey, L. & Graden, J. (1982). Declaring Students eligible for Learning Disabilities services: Why bother with data? *Learning Disabilities Quarterly*, *5*, 37-43.

Appendix A

Letter to Juanita Pawlisch dated November 18, 1994

JSP 94 3079 HDCCCC1

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UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

NOV 18 1994

NOV 25 1994

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Dear Dr. Pawlisch:

In August of 1992, the Office of Special Education Programs (OSEP) received a letter from Mr. Ken Miska of Middleton, Wisconsin (Complaint). The Complaint was addressed to both you and to Dr. Judy Schrag, former Director of the Office of Special Education Programs. In his Complaint, Mr. Miska requested that the Wisconsin Administrative Code be changed because it "unfairly restricts students to access to L.D. services by requiring:

1. 'Discrepancy in functional achievement in two or more readiness or basic skill areas'. Federal rules apply a 'one or more' standard.
2. 'Discrepancy at or below 50%'. The Federal rules [have] no such standard.
3. '[A] verbal or performance quotient of 90 or above'. Federal rules exclude mental retardation which is much lower than 90."

In regard to point one of Mr. Miska's Complaint, OSEP reviewed Subsection (2)(f)2.a.i, Learning Disabilities, Criteria for Identification, of Chapter PI 11.35, Children with Exceptional Needs, of the Wisconsin Administrative Code, which states "[t]he child, when first identified, shall have a significant discrepancy in functional achievement in two or more of the readiness areas of math, reading, spelling, and written language." (Emphasis added.) As noted in Mr. Miska's Complaint, Federal regulation §300.541(a)(1) states that a team may determine that a child has a specific learning disability if "the child does not achieve commensurate with his or her age and ability levels in one or more of the areas listed in paragraph (2)(a) of this section." (Emphasis added.)

In communication with members of your staff, OSEP requested and was supplied with a copy of your response to Mr. Miska's Complaint.

BEST COPY AVAILABLE

Within the text of the letter that you issued to Mr. Miska, you made reference to a March 1978 Division for Handicapped Children Bulletin no. 78-2, entitled, Wisconsin's Position on the Relationship of Federal LD Regulations to Existing State Criteria - Guidelines for Implementation. As presented within the text of your letter, the bulletin states:

> The federal rules indicate that a severe discrepancy in a single area of achievement may be used to determine that a child has a specific learning disability...Wisconsin's rules specify that a significant discrepancy must exist in two or more areas. However, since a significant discrepancy in reading or written expression rarely exists without a significant discrepancy in spelling, the requirement of a discrepancy in two or more areas such as reading and spelling or written language and spelling, is, in effect comparable to the federal suggestion of a severe discrepancy in a single area of achievement. The current Wisconsin rules allow for a significant discrepancy in the single area of math. The requirement for a significant discrepancy in two or more areas, with the exception of math, is therefore considered to be currently compatible with the federal criteria...

The Federal definition is specific in its requirement that only one or more of the areas, including oral expression, listening comprehension, basic reading skill, reading comprehension, mathematics calculating, or mathematical reasoning, need be severely discrepant in order to identify a child as having a learning disability.

WDPI stated that the current Wisconsin rules allow for a significant discrepancy in the single area of math. However, OSEP's review of Section PI 11.35(2)(f)2.a.i. does not support this comment. It states "... A significant discrepancy in the single area of math, **accompanied by less significant, yet demonstrable discrepancies in other basic skill areas may satisfy** the academic eligibility criteria." (bolded emphasis added). In addition, the Wisconsin Monitoring document, at Section 4.6.A.(2) does not differentiate between math and other skill areas in the requirement to determine eligibility based upon "a significant discrepancy in two or more areas."

Based upon OSEP's review of the Wisconsin Administrative Code and WDPI's response to Mr. Miska's of Complaint, OSEP requires that WDPI implement the following actions:

(1) WDPI must develop a memorandum for dissemination to all public agencies within Wisconsin indicating that the Wisconsin Administrative Code, as currently written, is inconsistent with Part B of the Individuals with Disabilities Education Act (Part B), and that all public agencies must immediately

discontinue the practice of requiring that all children suspected of a learning disability must exhibit a discrepancy in two or more areas of the readiness or basic skill areas of math, reading, spelling, and written expression.[1] The memorandum must be forwarded to OSEP for approval prior to its dissemination.

(2) WDPI must formally amend the Wisconsin Administrative Code to reflect Federal requirements regarding the identifying characteristics of children with learning disabilities as stated in 34 C.F.R. §300.541.

With regard to Mr Miska's second issue, the Wisconsin definition at Section PI 11.35(2)(f)2.a specifies that a significant discrepancy "is defined as functional achievement at or below 50% (.5) of expected achievement." WDPI was correct in its response to you that Federal regulations do not define "significant discrepancy." A State may operationalize the definition in a manner of its choosing, as long as the State does not act in a way either to exclude from services children who are eligible under Part B, or to provide services using Part B funds to children who do not meet Federal eligibility criteria. The Wisconsin Code also states, at PI 11.35(2)(f)2.a.ii., that "determination shall be based on a combination of formal and informal individualized tests, criterion-referenced measures, observations and an analysis of classroom expectations in basic skill areas." In addition, PI 11.35(2)(f)2.a.v. states:

> A child whose functional achievement approaches but is not at or below 50% of expected achievement may be considered to have met the academic functioning criterion if the child demonstrates variable performance between the sub-skills required for each of the areas of reading, writing, spelling, arithmetical reasoning or calculation and if the child meets all the other criteria used to identify the handicapping condition of learning disabilities. This determination shall be based on the M-team's collective judgement and the rationale shall be documented in the M-team report.

Based upon the above, we conclude that the requirement of a discrepancy at or below 50% does not violate the provisions of Part B in that adherence to the requirement does not deny services to students with learning disabilities.

With regard to point three of Mr. Miska's letter, he expressed concern that the Wisconsin Administrative Code unfairly restricts students from consideration for special education by requiring within its definition of learning disability that the child have a verbal or performance quotient of 90 or above. Mr. Miska further states that "Federal rules exclude mental retardation which is much lower than 90."

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[1] Based upon communication between OSEP and WDPI in a June 25, 1990 correspondence, it is OSEP's understanding that "readiness areas" includes consideration of receptive and expressive language and fine motor functioning.

Part B does not prohibit the use of intellectual performance scores from intelligence tests in determining eligibility as a child with mental retardation or a child with a specific learning disability. However, Part B makes it clear that a child with a learning disability cannot be a child who has learning problems which are primarily the result of mental retardation. Part B defines mental retardation as "significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a child's educational performance."

The Wisconsin Administrative Code, at PI 11.35 (2)(a) defines children with mental retardation as those with problems in measured intelligence, adaptive functioning, and academic functioning. In the sub-area of measured intelligence, Wisconsin defines measured intelligence, for children with mental retardation, as between -2 to -6 Standard Deviations (S.D.) on individual intelligence tests.

OSEP reviewed Wisconsin's Administrative Code (Code) at PI11.35(2)(f)2, which states:

> (b) Intellectual functioning. Children whose primary handicapping condition is due to learning disabilities shall exhibit normal or potential for normal intellectual functioning.
>
> > (i) This measure of intellectual functioning may be established by a score above a minus one standard deviation on a single intelligence instrument, or by a verbal or performance quotient of 90 or above on a multiple score intelligence instrument.

OSEP concludes, from the analysis of all information submitted, that Wisconsin's Code limits the number of children who may be considered for eligibility as a child with a learning disability. Specifically, Wisconsin requires that a child with a learning disability exhibit normal or potential for normal intellectual functioning through obtaining a score above -1 standard deviation on a single intelligence instrument or 90 or above on a multiple score intelligence instrument. Although Wisconsin's Code permits consideration of eligibility as a child with mental retardation, on a selective basis, for a child with scores between -1 and -2 S.D., the Code does not appear to permit consideration for eligibility as a child with a learning disability for a child who scores within this range. Thus, adherence to Wisconsin's Code effectively results in a group of children, whose learning problems are not the result of mental retardation, not being eligible for consideration as learning disabled because of their failure to achieve a score above -1 S.D.

Based upon all of the information reviewed, OSEP has determined that the definition of learning disability as discussed in the Wisconsin's Code is inconsistent with Part B requirements. Thus, WDPI must: (1) immediately notify all public agencies that they must discontinue the use of the WDPI criteria as noted above. This memorandum must be forwarded to OSEP for approval prior to its dissemination and (2) formally amend the Wisconsin Administrative Code to reflect criteria consistent with Federal requirements regarding the identification of children with a specific learning disability.

Please submit to OSEP a copy of WDPI's proposed memoranda within 30 days of receipt of this letter. A copy of this letter is being forwarded to Mr. Miska in response to his complaint. Should you have any questions, please feel free to call Barbara Route, State Contact for Wisconsin, at (202) 205-9029, or C. J. Jenzano, team leader for the State of Wisconsin.

Sincerely,

Thomas Hehir
Director
Office of Special Education
Programs

cc: Dr. Paul Halverson
Ms. Sandra Berndt
Mr. Ken Miska

Appendix B

Letter to Thomas Hehir dated January 20, 1995

WISCONSIN
DPI
State of Wisconsin
Department of Public Instruction
Mailing Address: P.O. Box 7841, Madison, WI 53707-7841
125 South Webster Street, Madison, WI 53702 (608)266-3390/(608)267-2427 TDD

John T. Benson
State Superintendent
Robert H. Gomoll
Deputy State Superintendent

January 20, 1995

Thomas Hehir
Director, Office of Special Education Programs
United States Department of Education
400 Maryland Avenue, S.W.
Washington, D.C. 20202

Dear Mr. Hehir:

In your letter to me dated November 18, 1994, you conveyed findings regarding Wisconsin's Learning Disabled (LD) eligibility criteria issued by the Office of Special Education Programs (OSEP) in response to a complaint filed by Ken Miska of Middleton, Wisconsin. In response to your letter, State Superintendent John Benson sent a letter dated December 7, 1994 to Secretary Riley. Mr. Benson urged the Secretary to reconsider OSEP's findings regarding our LD eligibility criteria.

Upon review of Mr. Benson's letter, you recently contacted me by telephone to discuss the matter. In our phone conversation, you indicated that OSEP's primary concern regarding our eligibility criteria now relates to "point three" of Mr. Miska's complaint. That aspect of his complaint alleges that Wisconsin's LD rules "unfairly restrict student access to LD services" by requiring "[a] verbal or performance quotient of 90 or above". In our telephone conversation, you asked that we provide additional information regarding this aspect of his complaint. As discussed below, we believe that OSEP's finding regarding this particular point reflects an obvious misunderstanding of Wisconsin's rule. We believe that OSEP's finding is inconsistent with the plain language of the rule as written. We further believe that OSEP's finding is inconsistent with the actual application of the rule by Wisconsin's professionals in the field.

OSEP recognized the fact that Wisconsin's eligibility rules permit consideration of eligibility as a child with mental retardation (Cognitive Disability or CD) on a selective basis for a child with intellectual performance scores from intelligence tests between -1 and -2 standard deviations. However, OSEP erroneously found that Wisconsin's rules "[do] not appear to permit consideration for eligibility as a child with a learning disability for a child who scores within this range. Thus, adherence to Wisconsin's Code effectively results in a group of children, whose learning problems are not the result of mental retardation, not being eligible for consideration as learning disabled because of their failure to achieve a score above -1 S.D." This erroneous finding is not supported by the rule as written or as applied in the field. A correct reading of the rule, as well as a review of application of the rule, shows that a child who achieves a score between -1 and -2 S.D. may be considered for eligibility as a child with a learning disability or as a child with a CD. Rather than effectively excluding a group of children from consideration as LD, Wisconsin's rule recognizes an overlapping area of potential eligibility and permits a finding of LD or CD on an individualized basis.

OSEP absolutely misconstrues our rule in stating that Wisconsin "requires that a child with a learning disability exhibit normal or potential for normal intellectual functioning through obtaining a score above -1 standard deviation on a single intelligence instrument or 90 or above on a multiple score intelligence instrument." (emphasis added.) Wisconsin does not require a child to obtain such a score to permit consideration as a child with a learning disability. Wisconsin does require that a child with LD exhibit normal or potential for normal intellectual functioning. One way to demonstrate normal or potential for normal intellectual functioning is through obtaining an intelligence test score in the range referenced above. If a child obtains such a test score, then the intellectual functioning eligibility criteria may be met without further documentation. If a child fails to obtain such a test score, further consideration of other relevant indices of intelligence is appropriate.

It is appropriate at this point to review the actual language of the rule at issue. Wisconsin's Administrative Code at PI 11.35(2)(f)2 provides:

> *b. Intellectual functioning. Children whose primary handicapping condition is due to learning disabilities shall exhibit normal or potential for normal intellectual functioning.*
>
> *i. This measure of intellectual functioning may be established by a score above a minus one standard deviation on a single score intelligence instrument, or by a verbal or performance quotient of 90 or above on a multiple score intelligence instrument. (emphasis added).*

Through use of the permissive word "may" rather than the mandatory word "shall," it is clear that the Wisconsin rule permits but does not require achievement of a particular score as the indicator of normal or potential for normal intellectual functioning. Under the rule, such a score is one way in which normal or the potential for normal intellectual functioning may be established. However, the rule explicitly permits and invites consideration of other relevant factors.

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Wisconsin's Code at PI 11.35(2)(f)2.b provides:

> *iii. If there is reason to suspect the test results are not true indices of a particular child's ability, then clarification of why the results are considered invalid shall be provided. Previous experience, past performance and other supportive data that intellectual functioning is average shall be present and documented in written form.*
>
> *iv. There may exist rare cases of severe language involvement which detrimentally affect the learning disabled child's ability to perform adequately on intelligence tests given the language emphasis of these instruments. In these rare situations the importance of the intellectual criteria may be reduced given substantial evidence to indicate average ability.*

It should be clear from the foregoing language that Wisconsin's rule promotes consideration of all relevant factors in its LD criteria and does not require achievement of a particular score on an intelligence test to permit consideration for LD services. The rule recognizes that tests can fail to actually measure intellectual potential and the evaluation team can disregard test scores if they explain why they believe the scores are invalid.

In addition to the plain language of the rule as written, professional practice in Wisconsin includes consideration for LD eligibility of children with intelligence test scores between -1 and -2 S.D. In response to your telephone call, I asked staff to conduct a "spot check" of LEA's with regard to identification of LD children. Specifically, I asked staff to informally contact a small sample of LEAs and request that the LEAs provide a sample of children being served as LD and the intelligence test scores obtained by that sample of children. While the responses we received from LEAs are not presented as a "statistically valid" survey, the responses clearly support the above discussion as to Wisconsin's LD eligibility criteria. In particular, the responses uniformly show that children who obtain test scores between -1 and -2 S.D. are in fact being considered and served as LD in this state on a case by case basis. Further, the sample data received from LEAs demonstrates that children who obtain intelligence test scores lower than -2 S.D. may be identified and served as LD in Wisconsin. This is due to the fact that Wisconsin's rule permits consideration of other appropriate indices of intelligence and does not require a particular test score as a prerequisite to eligibility. We have enclosed a copy of responses we received from LEAs for your review.

This sample data from Wisconsin school districts reinforces an investigation and report requested by a Wisconsin legislative task force in 1988 of the Milwaukee Public Schools concerning use of intellectual ability, specifically IQ, as a sole criterion for placing students in programs for children with learning disabilities. The attached August 29, 1988, letter from Victor J. Contrucci, Assistant Superintendent, Division for Handicapped

Children and Pupil Services, to Representative Margaret Krusick, regarding the review of Milwaukee Public Schools' policies, procedures and student records states:

> *We are pleased to report the we did not find anything in our review that suggests that the district uses IQ as a sole criterion for learning disabilities identification. In fact, Milwaukee Public Schools staff were able to show us several cases in which their multidisciplinary teams found students to be learning disabled even though they did not have a measured IQ that met the standard in the administrative code.*

Of particular significance in the Milwaukee August 16, 1988, investigation report, also attached, was the following:

> *Of the 23 cases, 12 were students who were considered to have average intellectual potential despite the fact that intellectual assessment tests indicated the student was low average or below. The most outstanding example was a student whose intellectual functioning level was assessed as being a 66 IQ, but who the M-team determined and documented that previous experience, present performance and other supportive data made the test results invalid and the student was determined to have learning disabilities and a need for exceptional education.*

Additional information regarding the manner in which professionals in the field actually apply Wisconsin's LD criteria maybe of further guidance to you. Attached are some selected pages from a recent publication (August 1994) of the Department of Public Instruction entitled, "Creating An Environment for Learning Disabilities, A Resource And Planning Guide." As noted in the introduction to the guide and the accompanying October 15, 1994 memorandum, this document was developed over a two year period by many individuals involved in assessment of and programming for children with learning disabilities and was distributed to nearly 5,000 individuals statewide. Appendix B of this guide, dealing with eligibility criteria for learning disabilities and, specifically, intellectual functioning states on page 151:

> *This criterion requires that a qualified person administer an individualized test of intelligence to the student. The test must be technically adequate. Intellectual functioning refers to the overall ability or potential of the child, not a single component or aspect of intelligence. It requires the use of professional judgement by all members of the M-team and clear and defensible documentation to justify the M-team's decision.*

The attached information clearly illustrates the flexibility inherent in Wisconsin eligibility criteria for learning disabilities with regard to the area of intellectual functioning. Multidisciplinary teams must use professional judgement in determining whether a child has normal or the potential for normal intellectual functioning. The professional who administers an intelligence test is one individual on the team. That individual does not play a gatekeeper role or exercise veto authority by virtue of intelligence test scores obtained in a child's evaluation. The flexibility and multidisciplinary nature of this process has been highlighted in widely publicized documents of the Department of Public Instruction.

Finally, in our recent telephone conversation, you indicated that Wisconsin's relatively low LD identification rate could be an indication that the state IQ criteria discriminates against eligible children. While our LD identification rate is relatively low, it is not the lowest in the nation. As reported in the U.S. Department of Education 15th Annual Report to Congress on the Implementation of the Individuals With Disabilities Education Act, 1993, two of fifty-one reporting jurisdictions had lower LD identification rates than Wisconsin.

However, in Wisconsin, unlike any other state, children with LD as their primary disability who had a secondary disability were counted under "multiple disabilities". In this particular context these children are more correctly counted under LD. While the 15th annual report to Congress (Table AA23 attached) gives Wisconsin's LD rate as 2.23% for the 1991-92 school year, the corrected value is 3.09% if LD children counted as multiple disabled are included. Thus, Wisconsin's LD identification rate exceeds six state's and is tied with Minnesota. Significantly, 3.09% is .80 or -.9 standard deviation from the mean national identification rate of 3.89%. This certainly places Wisconsin within the average range of state reported percentages of LD identification rates.

Further, Wisconsin has a relatively low identification rate in other disability categories as well. This overall low rate of special education identification reflects the generally good health care and the excellent education system in our state. If low identification rates are considered in determining whether a state has unacceptable eligibility criteria, we ask if OSEP is prepared to say that states with lower LD identification rates have unacceptable criteria as well. For the foregoing reasons we reject the suggestion that Wisconsin's identification rate presents any evidence of nonconformity with federal standards.

For all of the reasons stated, we believe that OSEP's findings in this matter were based on its misreading and misunderstanding of Wisconsin's rule and practice. The clarification and documentation provided herein clearly establish that fact. We therefore anticipate your cooperation, partnership, and close communication in correcting this very significant misunderstanding of our rule.

Sincerely,

Juanita S Pawlisch

Juanita S. Pawlisch, Ph.D., Assistant Superintendent
Division for Learning Support: Equity and Advocacy

/

Appendix C

Letter to Ken Miska dated September, 29, 1992 block

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State of Wisconsin
Department of Public Instruction
125 South Webster Street, Madison, WI 53702 (608)266-3390 / (608)267-2427 TDD

Herbert J. Grover
State Superintendent

Mailing Address:
P. O. Box 7841
Madison, WI 53707-7841

September 29, 1992

RE: 92-026

Mr. Ken Miska
6413 Mendota Avenue
Middleton, Wisconsin 53562

Dear Mr. Miska:

On August 31, 1992 (letter dated August 27, 1992), you filed a complaint against the Department of Public Instruction under 34 CFR 300.670-672 of the regulations implementing the Individuals with Disabilities Education Act (IDEA) and s.115.77(3)(am) and s.115.89(1), Wis. Stats. The Division for Handicapped Children and Pupil Services (DHCPS) investigated this complaint. Enclosed please find a report of the findings and resultant directives.

Please be advised that under 34 CFR 300.671(c), either the school district or the complainant may request that the Secretary of the United States Department of Education review these findings.

The DHCPS will upon request provide technical assistance regarding the enclosed report. Requests for technical assistance should be directed to Sandra Berndt, Chief, Program Review and Compliance Section, at (608) 266-2841.

Sincerely,

Juanita S Pawlisch

Juanita S. Pawlisch, Ph. D., Assistant Superintendent
Division for Handicapped Children and Pupil Services

ERept/arh
enclosure

cc: Ken Brittingham, Director, Bureau for Exceptional Children
Sandra Berndt, Chief, Program Review and Compliance Section
Judy Schrag, Director, Office of Special Education Programs

IDEA COMPLAINT INVESTIGATION
Wisconsin Department of Public Instruction
Case No. 92-026

On August 31, 1992 (letter dated August 27, 1992), a complaint was filed against the Department of Public Instruction by Ken Miska. This complaint alleges a violation of special education law regarding the implementation of programs for children with exceptional educational needs (EEN). Specifically, it is alleged that the definition of learning disabilities (LD) in the Wisconsin Administrative Code, enforced by the department, denies children with LD educational services by requiring that a child exhibit: a discrepancy between functional achievement and expected achievement in two or more readiness or basic skill areas; a 50% or greater discrepancy between functional and expected achievement; and a verbal or performance intelligence quotient of 90 or above.

Pursuant to 34 CFR 300.670-672 of the regulations implementing the Individuals with Disabilities Education Act (IDEA) and s.115.77(3)(am) and s.115.89(1), Wis. Stats., the Department of Public Instruction investigated this complaint. In investigating a complaint, the department reviews procedures to ensure that they comply with state and federal requirements.

==

ISSUE

Does the definition of learning disabilities (LD) in the Wisconsin Administrative Code, enforced by the department, deny children with LD educational services by requiring that a child exhibit: a discrepancy between functional achievement and expected achievement in two or more readiness or basic skill areas; a 50% or greater discrepancy between functional and expected achievement; and a verbal or performance intelligence quotient of 90 or above?

LEGAL REQUIREMENTS:

The sections of law relevant to this complaint are as follows:

> Wisconsin Administrative Code, Section PI 11.04
> Multidisciplinary teams.
>
> * * *
>
> (2) APPOINTMENT AND COMPOSITION. (a) Whenever a board receives an EEN referral for a child who is a resident of the district and who has not graduated from high school, the board shall appoint an M-team to conduct an M-team evaluation of the child to determine whether the child is a child with EEN
>
> * * *
>
> (4) MEETING. (a) The board shall set a date for the M-team to meet and discuss the members' evaluations and findings and all the information obtained under sub. (3).

* * * (d)
At the meeting the M-team shall discuss and consider all of the information received under sub. (3) and it shall discuss and compare the evaluations and findings of each of the members. Based upon its evaluations and findings the M-team shall, using the criteria established in s.PI 11.35, determine if the child has a handicapping condition

* * *

Wisconsin Administrative Code, Section PI 11.35
Eligibility criteria.

* * *

(2) Handicapping condition. * * * (f) Learning disabilities. 1. The handicapping condition of learning disabilities denotes severe and unique learning problems due to a disorder existing within the child which significantly interferes with the ability to acquire, organize or express information. These problems are manifested in school functioning in an impaired ability to read, write, spell or arithmetically reason or calculate.

2. Criteria for identification. The child shall meet the criteria in subd. 2. a. and b. to be considered as having the handicapping condition of learning disabilities.

a. Academic functioning. A child whose primary handicapping condition is due to learning disabilities shall exhibit a significant discrepancy between functional achievement and expected achievement. A significant discrepancy is defined as functional achievement at or below 50% (.5) of expected achievement.
i. The child when first identified, shall have a significant discrepancy in functional achievement in 2 or more of the readiness or basic skill areas of math, reading, spelling and written language. To determine a significant discrepancy in the readiness areas the M-Team shall consider the child's receptive and expressive language and fine motor functioning. A significant discrepancy in the single area of math, accompanied by less significant, yet demonstrable discrepancies in other basic skill areas may satisfy the academic eligibility criteria.

* * *

v. A child whose functional achievement approaches but is not at or below 50% of expected achievement may be considered to have met the academic functioning criterion if the child demonstrates variable performance between the subskills required for each of the areas of reading, writing, spelling, arithmetical reasoning or calculation and if the child meets all the other criteria used to identify the handicapping condition of learning disabilities. This determination shall be based on the M-Team's collective judgement and the rationale shall be documented in the M-Team report.

* * *

b. Intellectual functioning. Children whose primary handicapping condition is due to learning disabilities shall exhibit normal or potential for normal intellectual functioning.
i. This measure of intellectual functioning may be established by a score above a minus one standard deviation on a single score intelligence instrument, or by a verbal or performance quotient of 90 or above on a multiple score intelligence instrument.
ii. The instrument used to establish this measure shall be recognized as a valid and comprehensive individual measure of intellectual functioning.
iii. If there is reason to suspect the test results are not true indices of a particular child's ability, then clarification of why the results are considered invalid shall be provided. Previous experience, past performance and other supportive data that intellectual functioning is average shall be present and documented in written form.
iv. There may exist rare cases of severe language involvement which detrimentally affect the learning disabled child's ability to perform adequately on intelligence tests given the language emphasis of these instruments. In these rare situations the importance of the intellectual criteria may be reduced given substantial evidence to indicate average ability.

3. Learning problems, when primarily due to the following, shall be excluded from consideration as learning disabilities:
a. The other handicapping conditions specified in s. 115.76(3), Stats.

* * *

34 CFR 300.541 Criteria for determining the existence of a specific learning disability.

(a) A team may determine that a child has a specific learning disability if:
(1) The child does not achieve commensurate with his or her age and ability levels in one or more of the areas listed in paragraph (a)(2) of this section, when provided with learning experiences appropriate for the child's age and ability levels; and
(2) The team finds that a child has a severe discrepancy between achievement and intellectual ability in one or more of the following areas:
(i) Oral expression;
(ii) Listening comprehension;

> (iii) Written expression;
> (iv) Basic reading skill;
> (v) Reading comprehension;
> (vi) Mathematics calculation; or
> (vii) Mathematics reasoning.
>
> (b) The team may not identify a child as having a specific learning disability if the severe discrepancy between ability and achievement is primarily the result of:
> (1) A visual, hearing, or motor handicap;
> (2) Mental retardation;
> (3) Emotional disturbance; or
> (4) Environmental, cultural or economic disadvantage.

* * *

DISCUSSION:

The complainant alleges children who meet the federal criteria for determining the existence of a learning disability are denied educational services in Wisconsin. The complainant alleges these children are denied services because the definition of learning disabilities in the Wisconsin Administrative Code prevents them from being identified as learning disabled. The complainant points to three provisions of the code he alleges do not comply with federal regulations implementing Part B of the Individuals with Disabilities Education Act (IDEA).

The first code provision requires a child, when first identified, to have a significant discrepancy between potential and functional achievement in two or more of the readiness or basic skill areas. The complainant states that federal rules require underachievement in only one area.

The federal regulations require a child have a severe discrepancy between achievement and potential in one or more of the following areas: oral expression, listening comprehension, written expression, basic reading skill, reading comprehension, mathematics calculation, or mathematics reasoning. The Wisconsin Administrative Code requires that a significant discrepancy exist in two or more areas of the readiness or basic skill areas of math, reading, spelling and written expression. In March 1978 the department issued Division for Handicapped Children Bulletin No. 78-2 entitled, Wisconsin's Position on the Relationship of Federal LD Regulations to Existing State Criteria - Guidelines for Implementation. This bulletin compares the federal and the state provisions relating to this issue. The bulletin states:

> The federal rules indicate that a severe discrepancy in a single area of achievement may be used to determine that a child has a specific learning disability...Wisconsin's rules specify that a significant discrepancy must exist in two or more areas. However, since a significant discrepancy in

> reading or written expression rarely exists without a significant discrepancy in spelling, the requirement of a discrepancy in two or more areas such as reading and spelling or written language and spelling, is, in effect comparable to the federal suggestion of a severe discrepancy in a single area of achievement. The current Wisconsin rules allow for a significant discrepancy in the single area of math. The requirement for a significant discrepancy in two or more areas, with the exception of math, is therefore considered to be currently compatible with the federal criteria....

The complainant identifies another state code provision he alleges prevents children meeting the federal LD criteria from receiving services. This provision requires a child to function at or below 50% of expected achievement in order for a significant discrepancy to exist between potential and achievement. The complainant states the federal regulation has no such standard. In an August 18, 1978, letter to Harold Schmidt, one of the department's learning disabilities program supervisors, the federal Bureau of Education for the Handicapped, the predecessor to the Office of Special Education Programs of the U.S. Department of Education, stated:

> In response to your analysis, I would indicate that your perception that the federal requirements did not define severe discrepancy is correct. It is also true that since the federal regulations do not define severe discrepancy that other agencies are free to do so....(emphasis added)

The state code defines a significant discrepancy as a 50% or greater discrepancy between functional and expected achievement. The determination of whether a child exhibits a significant discrepancy is made by the multidisciplinary team (M-team), appointed to evaluate the child. Section PI 11.35(2)(f)2.a.v., Wis. Admin. Code., makes provision for an M-team to determine a significant discrepancy exists when functional achievement is not at or below 50% of expected achievement, based upon the M-team's collective judgement. Also the rule requires the team to document their rationale for this determination in the M-team report.

A third state code provision identified by the complainant that allegedly prevents children meeting the federal LD criteria from receiving services concerns intellectual functioning. The complainant asserts the state code does not comply with the federal regulations because the code requires a child to have a verbal or performance quotient of 90 or above on an intelligence test. He states the federal regulations exclude children with mental retardation (known in Wisconsin as cognitive disability) who have quotients "much lower than 90."

In an August 22, 1979, letter to Harold Schmidt of the department, the Bureau of Education for the Handicapped stated:

> ...a State may include appropriate measures (tests) for the evaluation of a child's intelligence and may include tests designed to provide information in understanding the child's performance. The phrase "intelligence standards" would seem to have a different connotation however. Such standards where in use, may not be used to deny a child's eligibility to the assessment process. Additionally, the regulations allow for no other exclusions other than those listed in Section 121a.541(b) {now renumbered to Section 300.541(b)}. **If, however, the States definition of mental retardation is such that children with intelligence levels up to the lower limit of the normal intelligence range can be considered mentally retarded, then a potential inconsistency would be alleviated...a State may use intelligence standards so long as a child is not excluded from the assessment process by such standards.**(emphasis added)

The state code requires children whose primary handicapping condition is learning disabilities to exhibit normal or the potential for normal intellectual functioning. The purpose of this requirement is to ensure children identified as learning disabled are not children with a cognitive disability. In Wisconsin a child who tests -1 standard deviation or lower on an individual intelligence test may be determined to be cognitively disabled.

The state code provides several methods for documenting a child's normal or potential for normal intellectual functioning. One way is for the child to attain a score above a -1 standard deviation on a single score intelligence instrument. Another way is for the child to attain a verbal or performance quotient of 90 or above on a multiple score intelligence test. Also the code permits the M-team to determine the child has normal or the potential for normal intellectual functioning when the child scores below these levels on an individual intelligence test. The team may use previous experience, past performance, and other data to document normal or potential for normal intellectual functioning. In this way, no child is excluded from consideration as having a learning disability simply because he or she has attained an intelligence quotient below a particular cut-off point.

In order to receive funds under Part B of the IDEA, a state must submit a Part B State Plan to the U.S. Department of Education (USDE). This plan must include the procedures the state undertakes to insure that all children in need of special education and related services are identified. Therefore, the plan includes the criteria for determining whether a child has a disability, including a learning disability. USDE reviews the plan and grants approval, if the plan conforms to IDEA requirements. In an August 6, 1992, letter to the State Superintendent of Public Instruction, USDE conditionally approved Wisconsin's Part B State Plan, which includes the LD definition in the Wisconsin Administrative Code. None of the conditions cited by USDE in the approval letter relate to the state's criteria for determination of LD.

CONCLUSION:

The provisions of the Wisconsin Administrative Code that require a child to exhibit a significant discrepancy in functional achievement in two or more academic areas; that define a significant discrepancy as a discrepancy between functional and expected achievement of 50% or greater; and that require a child to exhibit normal or the potential for normal intellectual functioning do not deny children with LD educational services.

The complaint is not substantiated.

This concludes our investigation of this complaint and we are closing this complaint investigation. This letter is not intended, and should not be construed, to cover any other issues regarding compliance with the Individuals with Disabilities Education Act (IDEA) or Chapter 115, Wisconsin Statutes, which may exist and which are not specifically discussed herein. Under the Wisconsin public records law, s.19.31-19.39, Wisconsin Statutes, it may be necessary to release this document and related correspondence and records upon request.

Please be advised that under 34 CFR 300.671(c) either the school district or the complainant may request a review of these findings by the Secretary of the United States Department of Education. Requests for secretarial review should be submitted to:

Robert R. Davila, Assistant Secretary
Office of Special Education and Rehabilitative Services
U. S. Department of Education
Switzer Building
330 C Street, S.W.
Washington, DC 20202

9/25/92

Juanita S. Pawlisch, Ph. D.
Assistant Superintendent
Division for Handicapped Children and Pupil Services

Date

evw

BEST COPY AVAILABLE

Appendix D

Letter to Thomas Hehir dated July 20, 1995

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State of Wisconsin
Department of Public Instruction
DPI
Mailing Address: P.O. Box 7841, Madison, WI 53707-7841
125 South Webster Street, Madison, WI 53702 (608)266-3390/(608)267-2427 TDD

John T. Benson
State Superintendent
Robert H. Gomoll
Deputy State Superintendent

July 20, 1995

Thomas Hehir, Director
Office of Special Education Programs
U. S. Department of Education
400 Maryland Avenue, S.W.
Washington, D.C. 20202

Dear Mr. Hehir:

The Wisconsin Department of Public Instruction (WDPI) is making the following assurances regarding the process and criteria that are used by public agencies in Wisconsin to identify children with learning disabilities (LD):

> WDPI ensures -- and will no later than August 15, 1995 disseminate to all public agencies in the State and make available to any interested parties a memorandum stating -- that throughout the period of Wisconsin's fiscal year 1996 Part B grant award all public agencies will implement eligibility criteria for children with specific learning disabilities that are fully consistent with the Part B eligibility criteria set forth in 34 CFR ss 300.7 and 300.541, and that any child who meets the criteria in 300.541 (a) can be found by an evaluation team to be a child with a disability under Part B unless the child falls into one of the categories excluded from coverage under 300.541 (b).
>
> By the end of January 1996, WDPI will conduct a special monitoring effort to determine whether evaluation teams in a sample of school districts in the State are interpreting and applying Wisconsin's eligibility criteria for children with specific learning disabilities in a manner that it is fully consistent with the Part B eligibility criteria set forth in 34 CFR ss 300.7 and 300.541. WDPI will develop with OSEP, no later than September 15, 1995, a plan for conducting this review, including: (a) the procedures that WDPI will use to select the public agencies that will be included in the review; (b) the standards and procedures that WDPI will use to collect and analyze data; and (c) the procedures that WDPI will use to report WDPI's findings to OSEP no later than February 28, 1996.
>
> If the results of the monitoring indicate a pattern of noncompliance with the requirements of 300.541, WDPI assures that it will take -- no later than July 1, 1996 -- all steps necessary to ensure compliance with this provision, including, if appropriate, technical assistance and revision of the Wisconsin regulations.

We are asking that these assurances be accepted as amendments to our 1996-98 State Plan and Application. We understand that with the submission of these assurances OSEP will be releasing our Part B state grant award with approval for pre-award costs.

Thank you for your assistance in reaching resolution to the questions and issues regarding our 1996-98 State Plan and Application.

Sincerely,

Juanita S Pawlisch

Juanita S. Pawlisch, Ph.D., Assistant Superintendent
Division for Learning Support: Equity and Advocacy

sks

cc: John T. Benson, State Superintendent
Richard W. Riley, Secretary of Education
Robert Gomoll, Deputy State Superintendent
Paul Halverson, Director, Divisionwide Budget and Data Management
Lawrence Ringer, OSEP
Ruth Ryder, OSEP

Appendix E

Research Questions and Project Responsibilities

1. When evaluating children for learning disabilities eligibility do multidisciplinary-teams (M-teams) exclude children from consideration solely based upon intellectual functioning? If so, what are the intellectual functioning criteria and to what extent is there flexibility in the application of those criteria?

2. After M-teams determine that children meet the criteria for the handicapping condition of learning disabilities how do they determine whether the child needs special education?

3. When evaluating children for learning disabilities how do M-teams determine the areas in which there must be a severe discrepancy?

4. Do parents, teachers, and administrators have suggestions for ways in which the Wisconsin learning disability (LD) criteria and identification procedures can be improved? If so, what are their suggestions?

B. Unless changed through mutual agreement the data collection procedures will be:

1. Sample: School districts selected for this study will include districts with very high, very low, and typical LD identification rates. Also included will be districts from which the DPI or the U.S. Department of Education, Office of Special Education Programs (OSEP), have received multiple complaints from parents relative to the LD identification process and procedures used by the district. At least 30 school districts will be included in the study.

A random sample of student M-team reports will be selected from each school district with the number of reports from a district being dependent upon the size of the district. The sample will include only those students who received an initial M-team evaluation during 1994-95 for the handicapping condition of learning disabilities. The sample from each district will include an equal number of students who were found to have a learning disability and who were not found to have a learning disability.

In addition to the randomly selected M-team reports, up to 10% of the total sample size will include M-team reports identified from parents who believe that their children have been inappropriately denied eligibility for learning disabilities. DPI will inform the following organizations of the opportunity for parents to nominate students for inclusion in the study: Parent Education Project, CHADD, LD Association of Wisconsin.

The number of student records to be included in the study will be negotiated between the investigators, DPI, and OSEP.

2. Standardized protocols will be developed by the principal investigators and the research consultant. These protocols will be mailed to school districts and completed by staff who participate in LD eligibility determinations. Protocols will also be completed by parents. All protocols will be scored by staff employed by the study and supervised by the principal investigators. The protocols will be used primarily to gather actual M-team report data and the perceptions of the staff and parents about that data and its relationship to the state/federal LD criteria rather than to gather opinions about the state LD eligibility criteria and identification process. Before the protocols are actually used to collect data they will be submitted to both the DPI and OSEP for their review and approval.

3. Of the sample of student records that are reviewed, the investigators and research consultant will select a sub-sample of records for which a follow-up structured interview will be held with the parents, teachers (both regular and special education), and director of special education. Where possible the interview will be held via telephone. The purpose of interviews is to verify, clarify, and elaborate on information obtained from written protocols.

C. The specific responsibilities of the investigators and the research consultant will include:

* Participate in designing the study
* Develop protocols and other materials used in the study
* Develop proposed standards and procedures to be used to collect and analyze data
* Mail and score protocols
* Conduct interviews
* Summarize data and prepare progress reports on the study
* Schedule steering committee meetings in conjunction with the committee chairperson
* Present data and progress reports to the steering committee by January 31, 1996
* Provide a written analysis and findings and recommendations of the study and present these to the steering committee
* Submit a written report of the findings of the study to DPI and OSEP by February 28, 1996
* Meet with DPI and OSEP about the study findings, implications, and recommendations of the investigators
* Receive recommendations from the steering committee and synthesize findings and recommendations of the committee in a final study report
* Provide consultation and assistance to the DPI in formulating and presenting appropriate follow up activities

V. TIME, COST, AND ADMINISTRATION

Appendix F

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Identification of Steering Committee Members

Steering Committee Members

Joanne Evans, Chairperson
625 Shoreline Court
Eau Claire, WI 54703
715-834-7770 (H)
715-834-9781 (W)
Parent

Mary Thurmaier
1926 Center Street
Stevens Point, WI 54481
715-341-1387
WASB School Board

Rosemarie Wold
306 East Kansas
Boscobel, WI 53805
608-375-5180 (H)
608-822-3276 (W)
CEC/LD

Shar Retzlaff
3962 Camrose
New Berlin, WI 53151
414-784-0815 (H)
414-327-1800 (W)
LDA

Tom Riley
P.O. Box 7882
Madison, WI 53707-7882
Legislative Representative

Mary Sobczak
Parent Education Project
2192 South 60th Street
West Allis, WI 53219
414-544-4548 (H)
414-328-5520 (W)

Barbara Van Haren
Howard-Suamico School District
1935 Cardinal Lane
Green Bay, WI 54313-7740
414-846-2863 (H)
414-434-4689 (W)
WCASS Admin.

Phil Knobel
Walworth County HCEB
504 W. Court Street
Elkhorn, WI 53121-1657
414-742-2186 (H)
414-741-4118 (W)
WASDA School District. Admin.

Terry Meyer
2437 Remington Road
Green Bay, WI 54302
414-465-9738 (H)
414-388-2951 (W)
Wisconsin Education Assoc. Council

Appendix G

Letters From Parent Organizations Requesting Nominations

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10/24/95

PEP-WI

Please forward this to any parents with child meeting criteria to invite them to consider participating Thanks!

Sister Patrice Colletti
Exec. Director
PEP-WI

THE UNIVERSITY OF WISCONSIN
OSHKOSH

October 16, 1995

Sr. Patrice Colletti
Executive Director - Parent Education Project
2192 South 60th Street
West Allis, WI 53219-1519

Dear Sr. Patrice Colletti:

For many years some parents and professionals have expressed concern over the Wisconsin learning disability eligibility criteria. Some people believe that the Wisconsin criteria are more restrictive than the federal learning disability definition, and as a consequence, they contend that some children are inappropriately denied special education services.

The Wisconsin Department of Public Instruction has contracted with the University of Wisconsin-Oshkosh for a study of criteria and procedures that school districts use to determine if a child qualifies as having a learning disability. The design of the study has been approved by both the Wisconsin Department of Public Instruction and the U.S. Department of Education. A steering committee, which has parent representatives, has been appointed to oversee the study and the analysis of data.

In this study we will be looking at records of all the students who were initially evaluated for learning disabilities eligibility during the 1994-95 school year in a randomly selected sample of twenty-five school districts. We will also look at records from a sample of five school districts that were selected because the Department of Public Instruction or the U.S. Department of Education has received more than one complaint from parents in those districts regarding learning disability identification.

BEST COPY AVAILABLE

The research design provides for up to ten percent of the total number of students included in the study to be identified by parents, **regardless of where in the state those students attend school**. The Parent Education Project, Learning Disabilities Association of Wisconsin, and Children with Attention Deficit Disorders-Wisconsin (C.H.A.D.D.) are being asked to assist in notifying parents of their opportunity to include their child in the study. Through distribution of this letter, we hope that you will assist us in informing parents that this study is being conducted and of their opportunity to nominate their children for inclusion in the study.

PARENTS MAY NOMINATE THEIR CHILD (CHILD'S RECORDS, ACTUALLY) TO BE IN THE STUDY.

NOTE: Researchers keep all info. CONFIDENTIAL.

As indicated below, nomination of a child for inclusion in the study should be sent to the University of Wisconsin-Oshkosh. Nomination for inclusion in the study will not be construed as either a complaint under state and federal special education law or as a request for a due process hearing to contest a district's eligibility determination. If an individual believes that a school district has violated the procedural requirements of special education law, a written complaint can be filed with the Department of Public Instruction. For additional information contact Elliot Weiman, Exceptional Education Team, P.O. Box 7841, Madison, WI, 53707-7841. A request for a due process hearing can be filed with the child's local school district.

NOTE - Volunteering is not considered to be filing a complaint

ELIGIBLE

Children who are eligible for inclusion in the study are those students who were initially evaluated for learning disability eligibility during the 1994-95 school year and who were found to be not eligible under Wisconsin Learning disability criteria. Parents wishing to nominate their child for inclusion in the study should send a letter with the parent(s) name and address, the child's name and birthdate, and the school district of residence to: Dr. Harold Thorpe, University of Wisconsin-Oshkosh, Department of Special Education, 800 Algoma Blvd., Oshkosh, WI, 54901. To be included in the study the nomination must be received no later than November ~~10~~ 15, 1995.

PARENTS NOV 15 DEADLINE TO SEND A LETTER

Thank you for your interest and support.

Sincerely,

Bert Chiang

Dr. Harold Thorpe Dr. Bert Chiang
Principal Investigators

cc: Juanita Pawlisch
Tom Hehir
Larry Ringer
Paul Halverson

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PARENT EDUCATION PROJECT OF WISCONSIN, INCORPORATED
2192 SOUTH 60TH STREET
WEST ALLIS, WISCONSIN 53219
PHONE (414) 328-5520 TOLL FREE 800-231-8382

October 26, 1995

Dear Parent,

Our records show that you may be interested in being a part of a special and important study being done in the state. It is a voluntary opportunity for you to help improve special education in Wisconsin.

The researchers, at the University of Wisconsin, Oshkosh, asked PEP-WI to help them identify some parents who might want to participate. The research involves their having access to children's school records. It doesn't involve having either the parents or the children themselves involved in anything.

If you would like to nominate your child for inclusion in the research, please:

( ) read the attached letter (which Sister Patrice received)
( ) make sure your child meets these requirements:
  1. underwent an initial evaluation for learning disabilities during the 1994-95 school year AND
  2. was found to be not eligible for special education services under Wisconsin's Learning Disability criteria.

Then, simply send a letter with:

- Parent(s) name and address, phone number
- childs name and birthdate
- school district of residence

to: Dr. Harold Thorpe
University of Wisconsin-Oshkosh
Department of Special Education
800 Algoma Blvd.
Oshkosh, WI 54901.

If you do not want to participate, you don't need to do anything at all.
Thank you so much.
Sincerely,

Sister Patrice

Parent Trainer, PEP-WI
Mary Sobczak

Sister Patrice Colletti, SDS
Executive Director

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Mary

MEMO: All PEP-WI Staff 10/24/95

***FOR IMMEDIATE ACTION ***

(Got your attention, didn't I?? SMILE)

FROM> S. Patrice
RE: Opportunity for PEP-WI to assist in state-wide study to improve quality of Education in Wisconsin

DEADLINES: For YOU: ASAP....for PARENTS Nov. 15

1. Please read the enclosed letter related to the upcoming LD Criteria research project. PEP-WI has been asked to help identify potential participants by notifying parents of children who "fit" the criteria. It is up to the parent to decide whether or not to participate... our role is to invite them to consider the opportunity.

2. Identify any of your caseload (current, past) that meet ALL of the following criteria:

( ) child was initially evaluated for LD in Wisconsin during the 94-95 school year
( ) child completed evaluation AND was found to be not eligible for LD services under Wisconsin LD criteria.

3. Contact (letter or phone) the parents, explain the project (use letter for info) and ask if they would like you to mail them a copy of the letter (which includes information on nominating their child if they wish)

OR: Send parents a cover letter (sample attached) with a copy of my letter to invite them to consider participation in the project.

NOTE: If you have TOO MANY parents to try to contact, I'd recommend the MAIL APPROACH... faster, cheaper, less time for you.

QUESTIONS? If parents have questions, they should contact Dr. Harold Thorpe, University of Wisconsin- Oshkosh. If YOU have questions, ask me (Patrice).

THANKS A BUNCH!!

Patrice

Patrice

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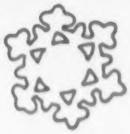
Enclosures.

P.S. If you use (copy) the cover letter, add your signature ☺



Message from LDA-W Co-Presidents Mary Sobczak and Joan Sanicola

We would like to say a special Thank You to the Fox Valley Chapter for all of their hard work in putting together our 25th Year Celebration on November 11th at the Valley Inn in Neenah. For all those who attended (and braved one of our season's first big snow storms), it was an informative and fun evening. Dr. Larry Silver gave an excellent program and our silent auction helped us raise over $400! It was a pleasure seeing old friends and making new ones. We are especially proud of our award winners (see page 2), all who are truly outstanding people!

LD ELIGIBILITY STUDY UPDATE: Last fall, LDA-W sent out a mailing alerting you to the study of criteria and procedures school districts use to determine LD eligibility. The U.S. Department of Education has ordered the Wisconsin Department of Public Instruction to do this work. Records of students evaluated for LD will be looked at. They will review files of those who were found eligible for LD services, as well as those who did not. Should you wish your child to be included in this study, or if you have any questions about it, you may contact Dr. Harold Thorpe or Dr. Bert Chiang, UW-Oshkosh, 800 Algoma Blvd., Oshkosh, WI 54901-8601. Send a letter with your (parent's) name and address, the child's name and birthdate, and the school district of residence. A steering committee is overseeing the study and analysis of data. We will share the results in a future newsletter.

TRANISITIONING: We had the opportunity to send some representatives to a meeting of the DVR Transition Project. The Greenfield Consortium provided funds to send two attendees to the conference in Appleton on Jan. 16th and 17th. Speakers from DPI, DVR, and PEP (Parent Education Project) gave talks on topics such as the Wisconsin School to Work System, Project Success, cultural issues, parent advocacy and DPI complaints and appeals. A parent panel also gave parent viewpoints and perspectives. We hope to be able to continue participation in this group. If you have an interest in this, please contact us at the LDA-W office.

BOARD OF DIRECTORS MEETING: A meeting that was scheduled for Jan. 20th had to be postponed because only five people responded that they could attend. It has been rescheduled for Saturday, March 16th. Exact time and place has not yet been determined. We truly could use your participation and ideas. The work we do is so important and the number of "workers" has been declining. In order for us to be an effective organization, especially now when so many changes are upon us, we need "new blood" as well as fresh ideas to grow as an organization. To be included on the Board mailing list, please call the state office (414) 821-0855 or send us a note. **We hope that you are able to become an active part of LDA-W.**

LENDING LIBRARY: The library is located at the state office. If you'd like a current listing of titles in the library (which included video and audio tapes), please contact the office.

PAT BUCKLEY MOSS $10,000 ART AWARD: A $5,000 award is given to the winning art teacher and another $5,000 to the teacher's school for use in fostering visual arts for LD students. Please share this opportunity with your school's art department. If interested in applying, inquiries should be directed to: P. Buckley Moss Society, 601 Shenandoah Village Drive, Box 1C, Waynesboro, Virginia 22980 Phone: 540-943-5678, Fax: 540-949-8408.

MEMBERSHIP: Please check your mailing label on the back of this letter. The top line indicates your chapter number, followed by your membership's expiration. If it says 95/10, your membership is past due. Please use the form to pay your annual dues (they're tax deductible!) and feel free to make a donation. If this is a complimentary copy, your label will have 96/Info or 96/Conf. You can join LDA-Wisconsin today, and continue receiving *Newsbriefs*, as well as the LDA of America bi-monthly publication.

NEW BERLIN LDA CHAPTER MEETING
Monday, November 13th 7:00 P.M.
Cleveland Heights School Library
17401 W. Cleveland Avenue

FROM THE EDITOR

I have this wonderful talent for loosing things. I am so thankful for computers because at least then they keep my "paperwork" together. I even have three file cabinets to keep other paperwork organized. You might have guessed that the file cabinets have the paperwork in stacks on top of them. We had an interesting talk one night at the LDA board meeting regarding the definition of norm and normal. I think I would like to be more organized but then again I usually find something while I'm looking through the stacks; that I maybe would have forgotten I had, and now find I need or is useful. The reason I mention this is because recently I've been thinking about more ways to help our children and our educational process. Since our children have some similar but also some different needs, I thought we could get together and list some of the problems our children or parents or teachers have had. I thought we could share our successes. I remember going to the CHADD Convention and getting lots of information and ideas. If this sounds like a good idea call the State LDA office and leave a message. If I don't hear from you, I'll have to go "back to the drawing board" so to speak.

****

MARK YOUR CALENDARS

On November 11, 1995 the 25th Anniversary of LDA will celebrate at the Valley Inn, in Neenah, WI. The featured speaker will Be Dr. Larry B. Silver. M.D. from Georgetown University. If you have any question concerning this event, call the state LDA office quickly. The reservations needed to be in on Nov.1. The LDA's phone number is 821-0855.

****

STEERING COMMITTEE

There is a steering committee that conducting a study of the procedures school districts use to determine LD eligibility. If you know of a child who was referred and evaluated for learning disabilities during the 1994-95 school year, let us know. Shar Retzlaff, vice president of the LDA - Wisconsin, is a member of the steering committee. Thanks for your help!

****

CONFERENCES

Look for the LDA display table at your schools during conferences!

And keep saving those Pick & Save receipts with We Care, on them. See you November 16th, and be kind and bring a friend.

Learning Disabilities Association
of Wisconsin
15738 W. National Avenue New Berlin, WI 53151 (414) 821-0855

October 25, 1995

Dear LDA-Wisconsin Members and Friends:

Do you have a child or know a child who was referred and evaluated for learning disabilities during the 1994-95 school year? LDA-Wisconsin has been asked to notify parents of the opportunity to be included in a study of criteria and procedures that school districts use to determine LD eligibility. Attached is a letter to LDA-W from Drs. Harold Thorpe and Bert Chiang of UW-Oshkosh, directors of the study, that explains the reasons for the study and how to be included.

LDA-Wisconsin's vice-president, Shar Retzlaff, is a member of the steering committee that is overseeing the study and data analysis. This committee will meet monthly to review and discuss the study outcomes.

Please also note that to be considered eligible for this study, the child should have been referred for LD and evaluated in the 94-95 school year. This does include those who were determined not eligible for LD services.

If you can help with this study, or have questions about it, contact Dr. Harold Thorpe by November 15th.

• •

Reminder: The LDA-Wisconsin Silver Anniversary will be celebrated November 11th, 1995 in Neenah. Send in your registration today!

+ + + + + + + + + + + + + + + + + + + +

Notice of Scholarship availability to attend the 1996 LDA International Conference in Dallas, Texas, March 6th to 9th, 1996. LDA-Wisconsin will award a scholarship to cover registration fees to the Dallas conference. .To qualify, you must be a member of LDA and submit a letter explaining what you feel you will benefit from attending the conference. Please submit your letter to LDA-Wisconsin by December 1, 1995. (Any questions should be directed to the LDA-W state office.) LDA-Wisconsin, 15738 W. National Avenue, New Berlin, WI 53151.

<<<<<<<<<<<<>>>>>>>>>>

Did you renew your membership? Have you joined LDA? If not, now is the time! Membership in LDA-Wisconsin includes membership in LDA of America and local chapters, where available. To ensure receiving mailings and newsletters, please send in your $25 annual dues today!

We can be most effective by working together.
Joan Sanicola and Mary Sobczak, LDA-W Co-presidents

Appendix H

Profile Forms Used To Analyze Student Records

STUDENT PROFILE SHEET (PROTOCOL)

A. GENERAL INFORMATION

1. Student identification number___________ 1b. Date of Referral ______________

2. Age of student: 1-2-3-4-5-6-7-8-9-10-11-12-13-14-15-16-17-18-19-20

3. Grade of student: P--K--1--2--3--4--5--6--7--8--9--10--11--12

4. Gender of student: Male(1) Female(2)

5. Ethnicity of student: African Am.(1) Asian(2) Cauc(3)
Hispanic(4) Native Am.(5) Unknown(6)

5a. Was the student transferred from out-of-state? **Yes(1) No(2)**

5b. If yes, from what state? (use abbreviation) ________

6. Was the student ever retained? **Yes(1) No(2)**

7. If retained, how many times? 1--2--3--4 What grades? K--1--2--3--4--5--6--7--8--9--10--11--12

8. Was the student offered placement within an LD program? **Yes(1) No(2)**

9. Who made this referral?
____LD teacher(1) ____classroom teacher(2) ____school psychologist(3)
____counselor(4) ____school nurse(5) ____social worker(6)
____parent(7) ____principal(8) ____sp. ed. director/disignee(9)
other(10)____

10. What members constituted the M-team? (Write the number of participants before the name)
____LD teacher(1) ____classroom teacher(2) ____school psychologist(3)
____counselor(4) ____school nurse(5) ____social worker(6)
____principal(7) ____speech & language(8) ____sp. ed. director/designee(9)
other(10)____

11. Who chaired the M-team? ____school Psychologist(1) ____LD teacher(2)
____sp. ed. director/designee(3) ____principal(4) ____unknown(5)
other(6)____

12. Was there a parent advocate present at the M-team? **Yes(1) No(2)**

53. Was a different formula or other systematic method used to determine significant discrepancy?
Yes(1) No(2) Unclear(3)
If yes, what was it?____

54. If a discrepancy formula or other systematic method is used, which IQ score was used?
___sub-scale score/range(1) ___full scale score/range(2) ____Unclear(3)
other (4) / what____

55. Did the M-team use 50% of expected achievement to determine significant discrepancy, even though no formula was shown? **Yes(1) No(2) Unclear(3)**

56. Is there evidence that the M-team, using any procedure, identified significant discrepancy as being within one of the following ranges, when compared with expected achievement? In what achievement areas did this occur, i.e., reading, etc.?
____51%-55%(1)____
____56%-60%(2)____
____61%-65%(3)____
____66%-70%(4)____
____71%-75%(5)____
____above 75%(6)____
____Unclear(7)

57. Did the M-team conclude that this student was not eligible for LD placement solely because he/she had only one area of significant discrepancy? **Yes(1) No(2)**

58. Did the M-team conclude that this student was not eligible for LD placement solely because his/her functional achievement was more than 50% of expected achievement or less than 1-year delay? **Yes(1) No(2)**

E. EXCLUSIONARY FACTORS

59. Was the student excluded from placement for LD because learning problems were considered to be a result of one or more of the following factors? Identify each factor.
____ primarily ED (S/F)(1)
____ primarily CD/MR (S/F)(2)
____ primarily the result of visual, hearing, motor, or other health related impairments (F)(3)
____ primarily the result of extended absence, continuous inadequate instruction, curriculum planning, or instructional strategies (S)(4)
____ primarily a discrepancy between ability and school achievement due to motivation (S)(5)
____ functioning at grade level but with potential for greater achievement (S)(6)
____ primarily a result of environmental, cultural or economic disadvantage (F)(7)

F. NEED FOR SPECIAL EDUCATION

60. If the student meets the criteria for learning disabilities, on what basis did the M-team determine whether the child needs special education? (from any part of the M-team report)

____ students needs can't be met in regular education classrooms(1)
____ reasonable accomodations have been made in regular education classrooms and the student has continued to fail(2)
____other(3) ____
____
____

61. As a result of this referral and M-team evaluation, was the student placed in or referred to an EEN program other than LD? **Yes(1) No(2)**

62. What was that program?
____ED(1)
____CD / MR(2)
____EC:EEN(3)
____Speech / Language(4)
____Physically Disabled(5)
____Other(6) What?__________

63. As a result of this referral and M-team evaluation, was the student placed in or referred to a program outside of EEN? **Yes(1) No(2)**

64. What was/were the program(s)?
____Chapter One(1)
____504(2)
____At Risk(3)
____ESL(4)
____Other(5) What?__________

G. RED FLAG ISSUES THAT MIGHT IMPLY FLEXIBLE USE OF STATE CRITERIA WHEN PLACING STUDENTS IN LD PROGRAMS

65. Is there evidence of attempts to provide flexibility in the decision process?

Yes(1) No(2) NA(3)

If so, what evidence?____

66. Were there any unusual circumstances leading to a decision for placement in LD?

Yes(1) No(2) NA(3)

If so, what were those circumstances?______________________________

67. Other Red Flag Issues:____

H. RED FLAG ISSUES THAT MIGHT IMPLY VIOLATION OF STUDENTS RIGHTS

68. Were there any unusual circumstances leading to a decision for non placement in LD?

Yes(1) No(2) NA(3)

If so, what were those circumstances?______________________________

69. Other Red Flag Issues ____

I . BORDERLINE OR CLEAR-CUT DECISION

70. In your opinion, should this placement decision be considered:

____Borderline(1) **____Clear-Cut(2)**

Appendix I

M-team Materials and Documentation Requested From School Districts

File Sources

I. Pre-referral log, Child Study Team Records, or other documented of efforts made to evaluate and meet student needs prior to the EEN referral.

II. Due process Reports

1. EEN Referral Form
2. Notice of Receipt of Referral and Consent for Evaluation
3. Notice of Receipt of Referral and Intent to Re-evaluate (used for determining if any additional EEN exists)
4. Invitation to M-Team Meeting
5. The entire M-Team report
    - a. Addenda to the report
    - b. Request by the Director for more information and response
    - c. Minority Reports
    - d. Re-Convened M-Team reports
6. Notice of M-Team findings
7. Notice of placement

III. Reports to the M-Team

- a. Psychological
- b. LD and/or EC:EEN
- c. Regular Ed.
- d. Others
- e. Parent (if it exists separately from the above reports)

IV. Score summary sheets from Test Protocols

- a. Psychological
- b. Achievement tests

Appendix J

Survey Form Completed by Special Education Directors

LD ELIGIBILITY CRITERIA STUDY

QUESTIONS FOR PARTICIPATING SCHOOL DISTRICTS

Name of School District ________________________________

Person Completing Survey ___________________________

1 Number of students enrolled in district ____________________

2a Number of students referred for LD evaluations in 1994-95
Total _____ Males ______ Females ______

2b Number of students in question 2a who were placed in LD programs
Total _____ Males ______ Females ______

2c Number of students in question 2a with full scale IQ scores below 90 who were placed in LD programs
Total _____ Males ______ Females ______

2d Number of students in question 2a with full scale IQ scores below 90 who were not placed in LD programs
Total _____ Males ______ Females ______

3a Please indicate the typical composition of the LD multidisciplinary team at the elementary level (Please check all that apply)

Classroom teacher ____
LD teacher ____
Diagnostic teacher ____
(person completing evaluations, if other than LD teacher) ____
School Psychologist ____
Counselor ____
School Nurse ____
School Social Worker ____
Parent(s) ____

Principal ____
Special Education Director/Designee ____
PT/OT ____
Speech Therapist ____
Other (specify)
____
____
____
____

3b. Please indicate the typical composition of the multidisciplinary team at the middle school/junior high level. (Please check all that apply.)

Classroom teacher ____
LD teacher ____
Diagnostic teacher ____
(person completing evaluations,
if other than LD teacher) ____
School Psychologist ____
Counselor ____
School Nurse ____
School Social Worker ____
Parent(s) ____

Principal ____
Special Education
Director/Designee ____
PT/OT ____
Speech Therapist ____
Other (specify)
____
____
____
____

3c. Please indicate the typical composition of the multidisciplinary team at the high school level. (Please check all that apply.)

Classroom teacher ____
LD teacher ____
Diagnostic teacher ____
(person completing evaluations,
if other than LD teacher) ____
School Psychologist ____
Counselor ____
School Nurse ____
School Social Worker ____
Parent(s) ____

Principal ____
Special Education
Director/Designee ____
PT/OT ____
Speech Therapist ____
Other (specify)
____
____
____
____

4. Who usually chairs the multidisciplinary team at the elementary level?

____

middle school/junior high level?

____

high school?

____

5a. Please describe the intellectual functioning criteria used by the district to document the potential for average functioning.

____
____
____
____
____
____
____

5b. Is this policy in written form? ____ yes (please attach) ____ no

6a. What academic areas are used to determine the areas in which there is a severe discrepancy? Is there an established order for examining these? If so, please describe.

6b. Is this policy in written form? ____ yes (please attach) ____ no

7a. Please describe the process by which the need for special education is determined.

7b. Is this policy in written form? ____ yes (please attach) ____ no

8a. Please indicate the tests that are available in the district for determining the level of intellectual functioning of students referred for LD evaluations.

8b. Please indicate the tests that are available in the district for determining the level of academic achievement of students referred for LD evaluations.

9a. Is a standard battery for measuring intellectual functioning recommended for use in the district? ____ yes ____ no

9b. If yes, please specify the battery

10a. Is a standard battery for measuring academic achievement recommended for use in the district? ____ yes ____ no

10b. If yes, please specify the battery

11a. Is it a policy within your district to utilize building assistance teams or student support teams to assist teachers in developing/implementing pre-referral interventions?
____ yes ____ no

11b. If yes, please indicate the percentage of schools at each level that utilize such teams
Elementary____% Middle school/junior high ____% High school____ %

11c. If yes, please indicate the composition of these teams (at each level):

11d. If yes, please describe the type of training that has been provided to team members.

12a. Is collaboration between regular and special education or inclusion implemented on a regular basis in
elementary schools ____ yes ____ no (if yes, indicate % of schools ____%)
middle/junior high ____ yes ____ no (if yes, indicate % of schools ____%)
high schools ____ yes ____ no (if yes, indicate % of schools ____%)

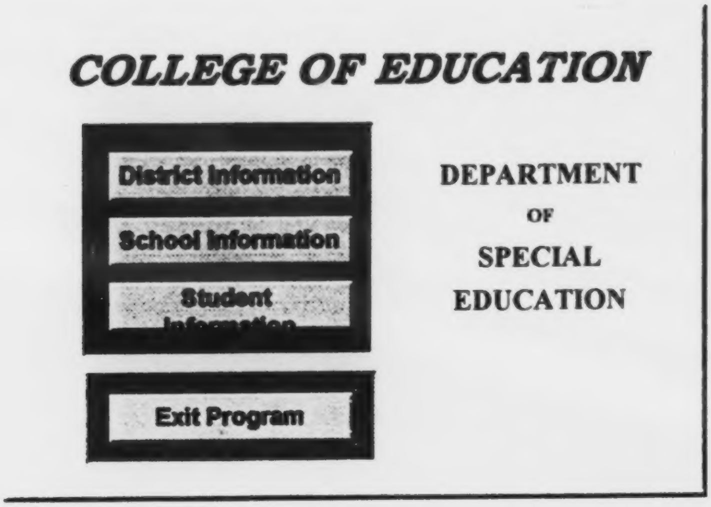
12b. If yes to 12a, please describe the nature of the collaboration or inclusion (for example, team-teaching, pre-referral activities, collaboration with individual students).

13. Please indicate your suggestions for improving Wisconsin LD eligibility criteria and identification procedures.

Your assistance in completing this survey is greatly appreciated!

Appendix K

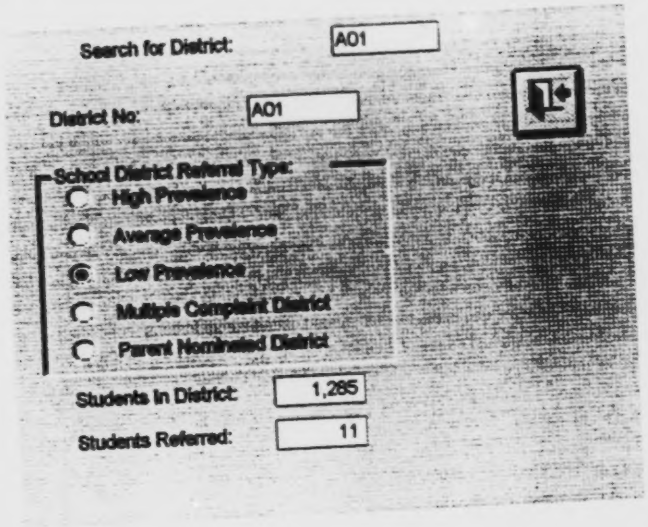
Access: Computer Data Base Program



COLLEGE OF EDUCATION

DEPARTMENT
OF
SPECIAL
EDUCATION

District Information
School Information
Student Information
Exit Program



Search for District: A01

District No: A01

School District Referral Type:
- ○ High Prevalence
- ○ Average Prevalence
- ● Low Prevalence
- ○ Multiple Complaint District
- ○ Parent Nominated District

Students In District: 1,285

Students Referred: 11

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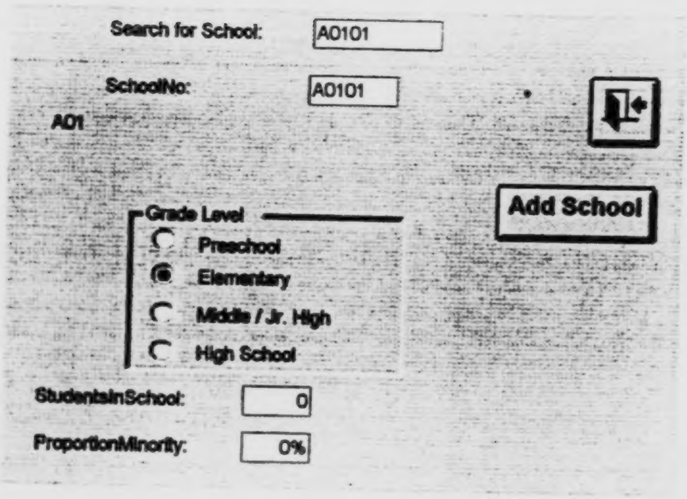

Search for School: A0101

SchoolNo: A0101

A01

Grade Level

○ Preschool

● Elementary

○ Middle / Jr. High

○ High School

StudentsInSchool: 0

ProportionMinority: 0%

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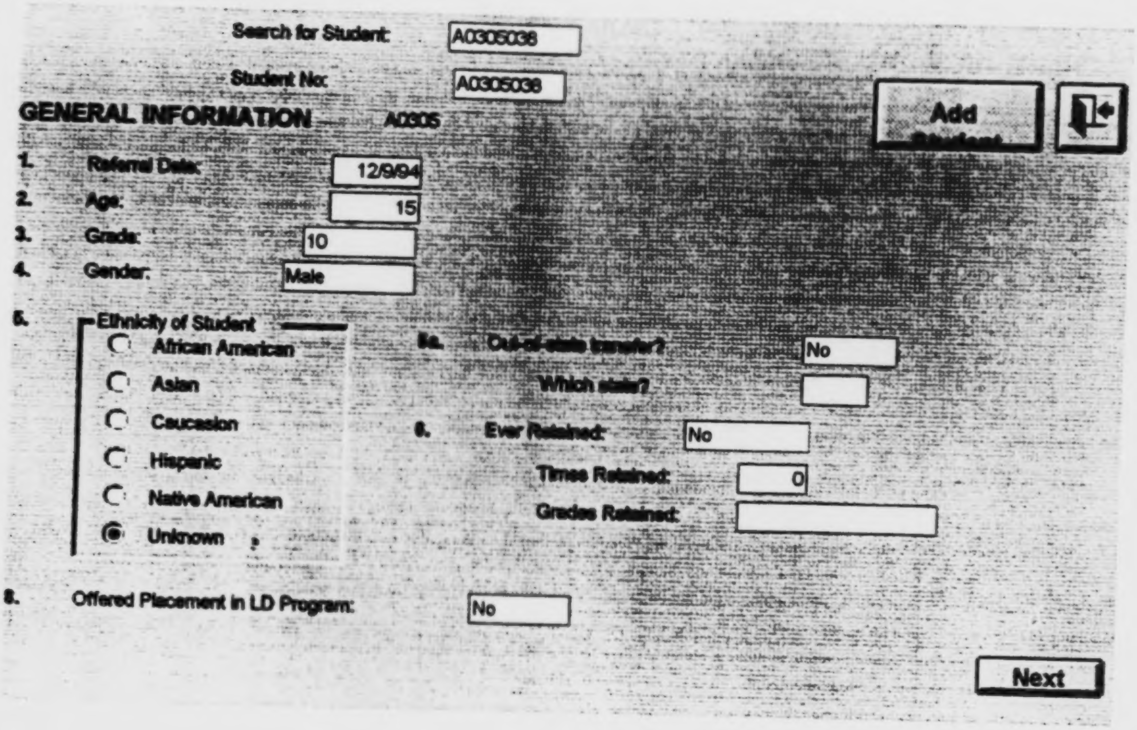
202



Search for Student: A0305038

Student No: A0305038

GENERAL INFORMATION A0305

1. Referral Date: 12/9/94
2. Age: 15
3. Grade: 10
4. Gender: Male
5. Ethnicity of Student

○ African American
○ Asian
○ Caucasion
○ Hispanic
○ Native American
● Unknown

5a. Out-of-state transfer? No

Which state?

6. Ever Retained: No

Times Retained: 0

Grades Retained:

8. Offered Placement in LD Program: No

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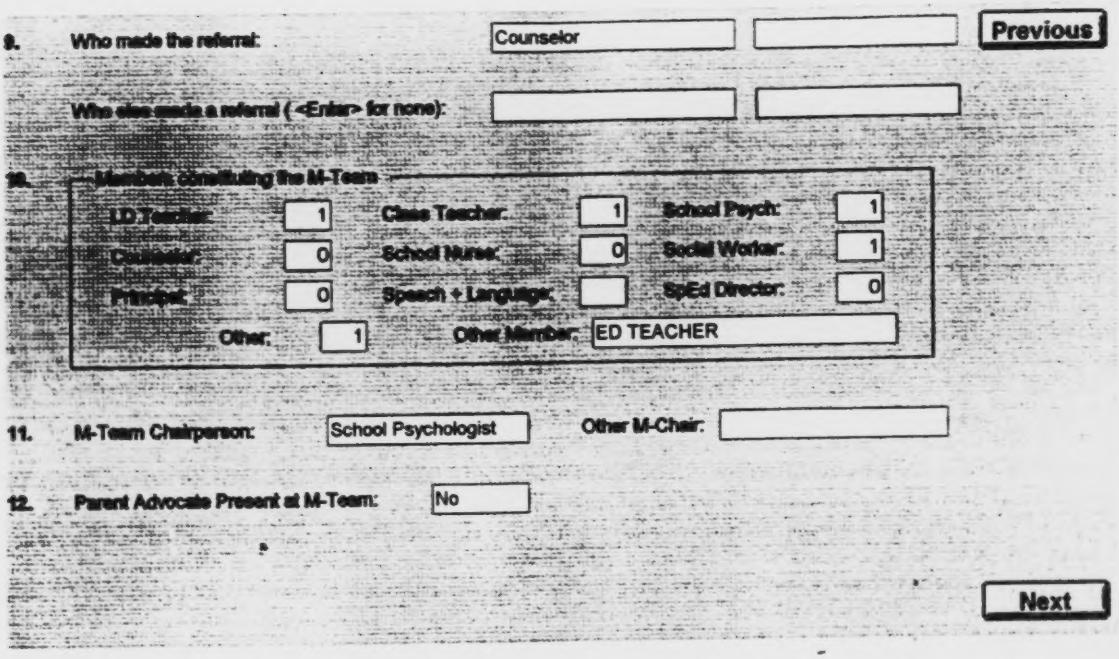

9. Who made the referral: Counselor

Who else made a referral (<Enter> for none):

10. Members constituting the M-Team

LD Teacher: 1
Class Teacher: 1
School Psych: 1
Counselor: 0
School Nurse: 0
Social Worker: 1
Principal: 0
Speech + Language:
SpEd Director: 0
Other: 1
Other Member: ED TEACHER

11. M-Team Chairperson: School Psychologist
Other M-Chair:

12. Parent Advocate Present at M-Team: No

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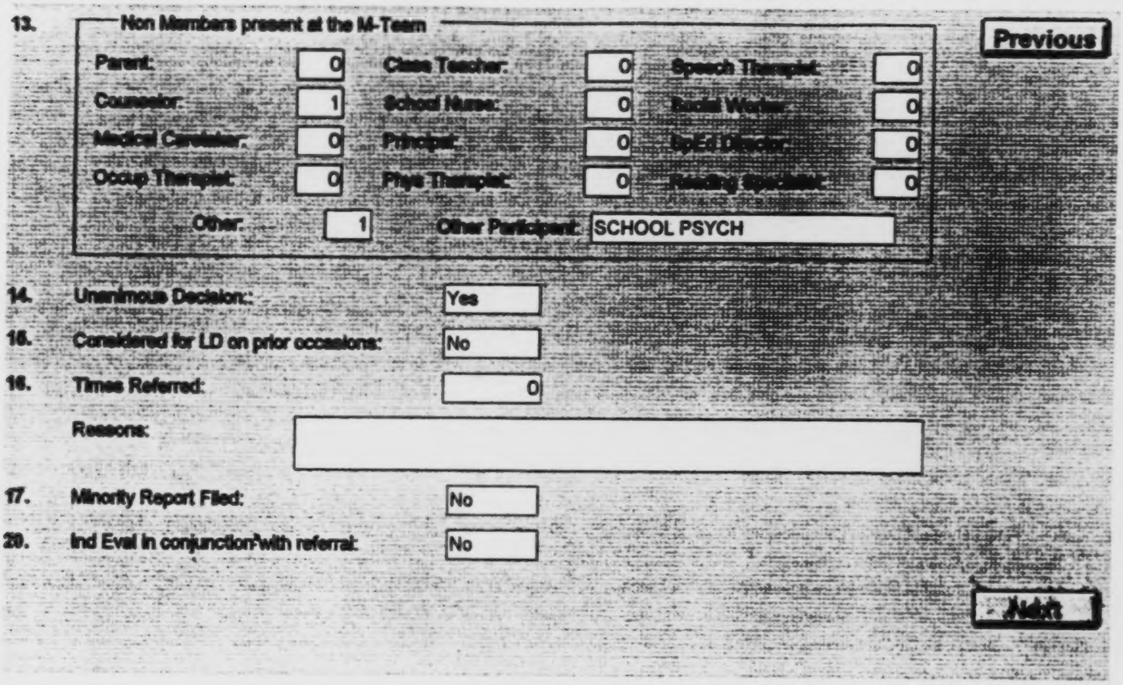

13. Non Members present at the M-Team

Parent:	0	Class Teacher:	0	Speech Therapist:	0
Counselor:	1	School Nurse:	0	Social Worker:	0
Medical Caretaker:	0	Principal:	0	SpEd Director:	0
Occup Therapist:	0	Phys Therapist:	0	Reading Specialist:	0
Other:	1	Other Participant:	SCHOOL PSYCH		

14. Unanimous Decision:: Yes

15. Considered for LD on prior occasions: No

16. Times Referred: 0

Reasons:

17. Minority Report Filed: No

20. Ind Eval in conjunction with referral: No

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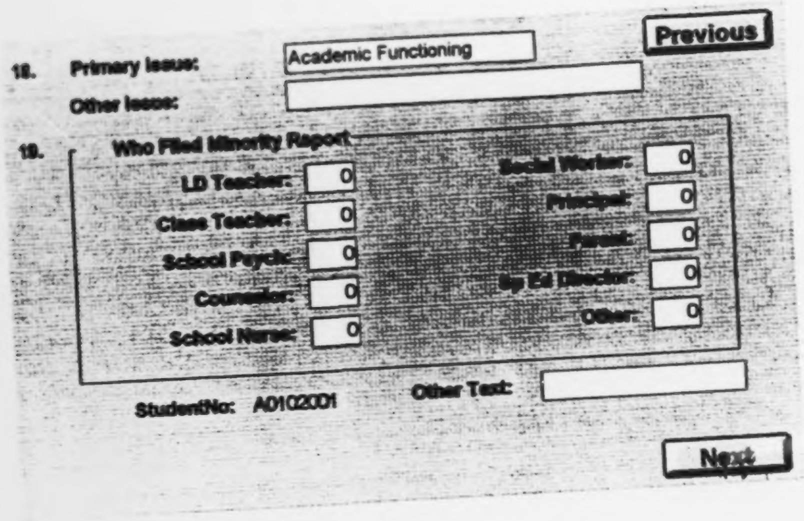

18. Primary Issue: Academic Functioning

Other Issues:

19. Who Filed Minority Report

LD Teacher: 0

Class Teacher: 0

School Psych: 0

Counselor: 0

School Nurse: 0

Social Worker: 0

Principal: 0

Parent: 0

Sp Ed Director: 0

Other: 0

Other Text:

StudentNo: A0102001

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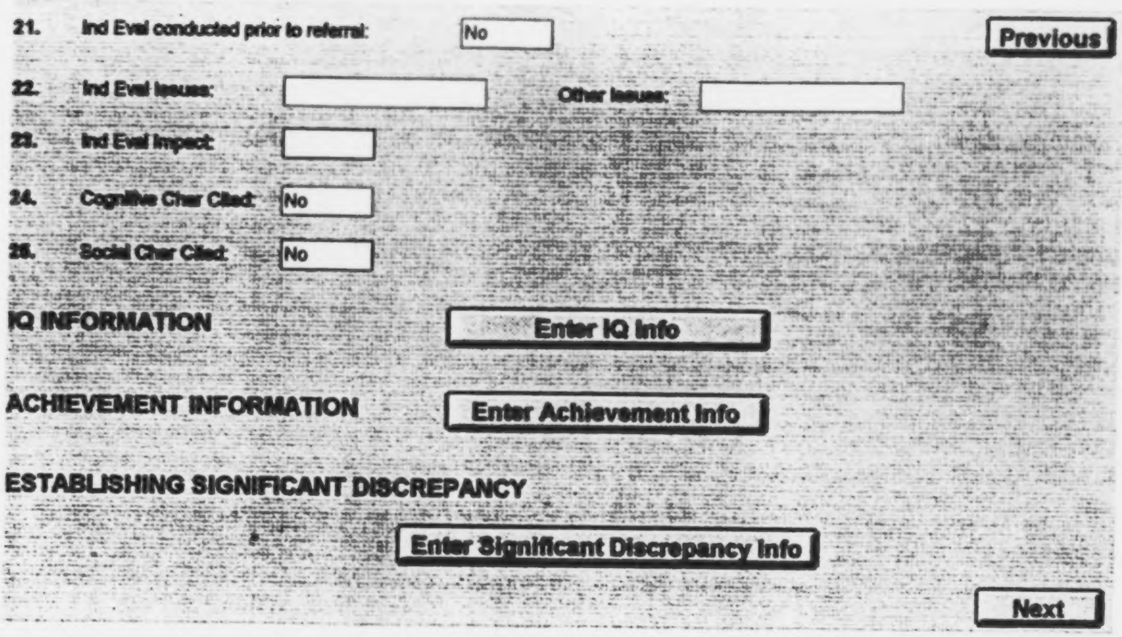
Previous
Enter IQ Info
Enter Achievement Info
Enter Significant Discrepancy Info
Next

21. Ind Eval conducted prior to referral: No

22. Ind Eval Issues:

Other Issues:

23. Ind Eval Impact:

24. Cognitive Char Cited: No

25. Social Char Cited: No

IQ INFORMATION

ACHIEVEMENT INFORMATION

ESTABLISHING SIGNIFICANT DISCREPANCY

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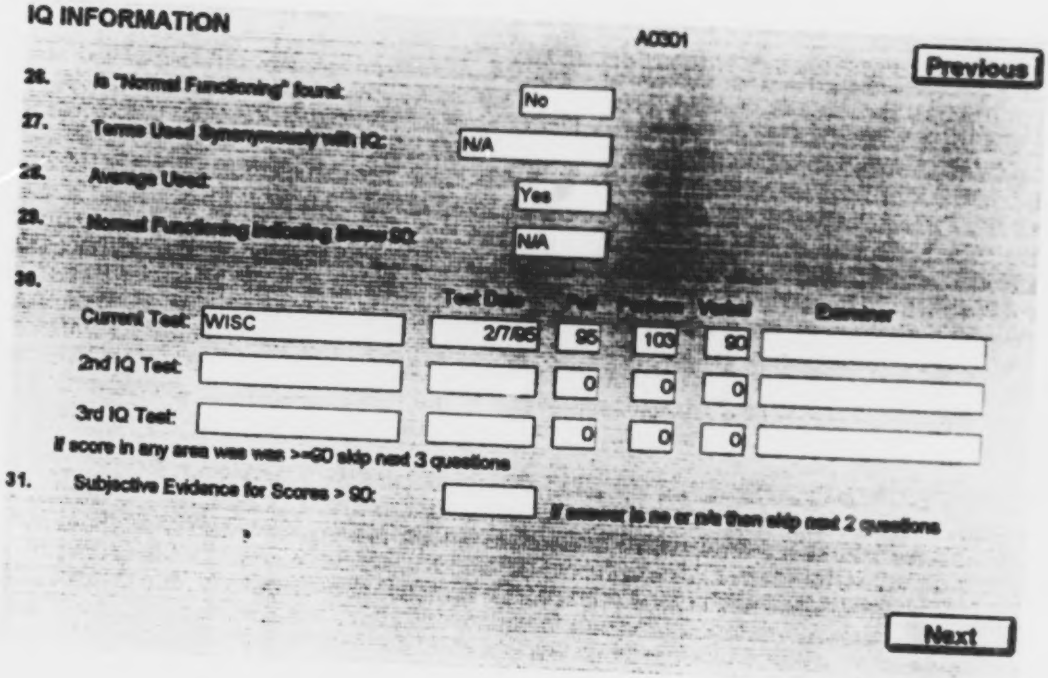

IQ INFORMATION

A0301

26. Is "Normal Functioning" found: No

27. Terms Used Synonymously with IQ: N/A

28. Average Used: Yes

29. Normal Functioning Indicating Below 90: N/A

30.

		Test Date	Full	Perform	Verbal	Examiner
Current Test:	WISC	2/7/95	95	103	90	
2nd IQ Test:			0	0	0	
3rd IQ Test:			0	0	0	

If score in any area was was >=90 skip next 3 questions

31. Subjective Evidence for Scores > 90:

If answer is no or n/a then skip next 2 questions

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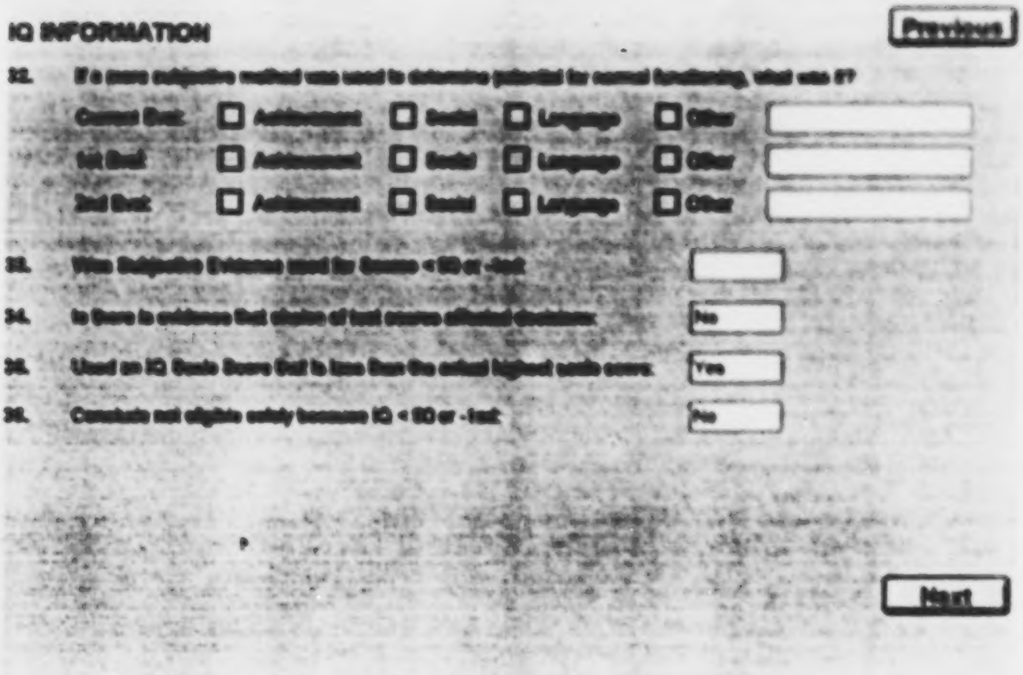

IQ INFORMATION

32. If a more subjective method was used to determine potential for normal functioning, what was it?

Current Eval: ☐ Achievement ☐ Social ☐ Language ☐ Other

1st Eval: ☐ Achievement ☐ Social ☐ Language ☐ Other

2nd Eval: ☐ Achievement ☐ Social ☐ Language ☐ Other

33. Was Subjective Evidence used for Scores < 80 or -1sd:

34. Is there is evidence that choice of test scores affected decisions: No

35. Used an IQ Scale Score that is less than the actual highest scale score: Yes

36. Conclude not eligible solely because IQ < 80 or -1sd: No

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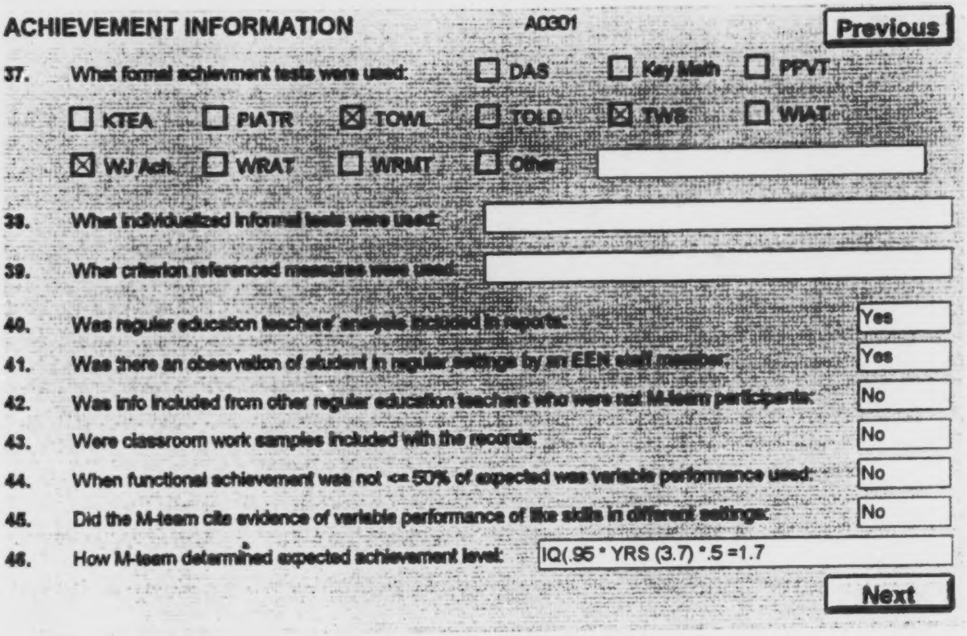

ACHIEVEMENT INFORMATION A0301

37. What formal achievment tests were used: ☐ DAS ☐ Key Math ☐ PPVT
☐ KTEA ☐ PIATR ☒ TOWL ☐ TOLD ☒ TWS ☐ WIAT
☒ WJ Ach. ☐ WRAT ☐ WRMT ☐ Other

38. What individualized informal tests were used:

39. What criterion referenced measures were used:

40. Was regular education teachers' analysis included in reports: Yes

41. Was there an observation of student in regular settings by an EEN staff member: Yes

42. Was info included from other regular education teachers who were not M-team participants: No

43. Were classroom work samples included with the records: No

44. When functional achievement was not <= 50% of expected was variable performance used: No

45. Did the M-team cite evidence of variable performance of like skills in different settings: No

46. How M-team determined expected achievement level: IQ(.95 * YRS (3.7) *.5 =1.7

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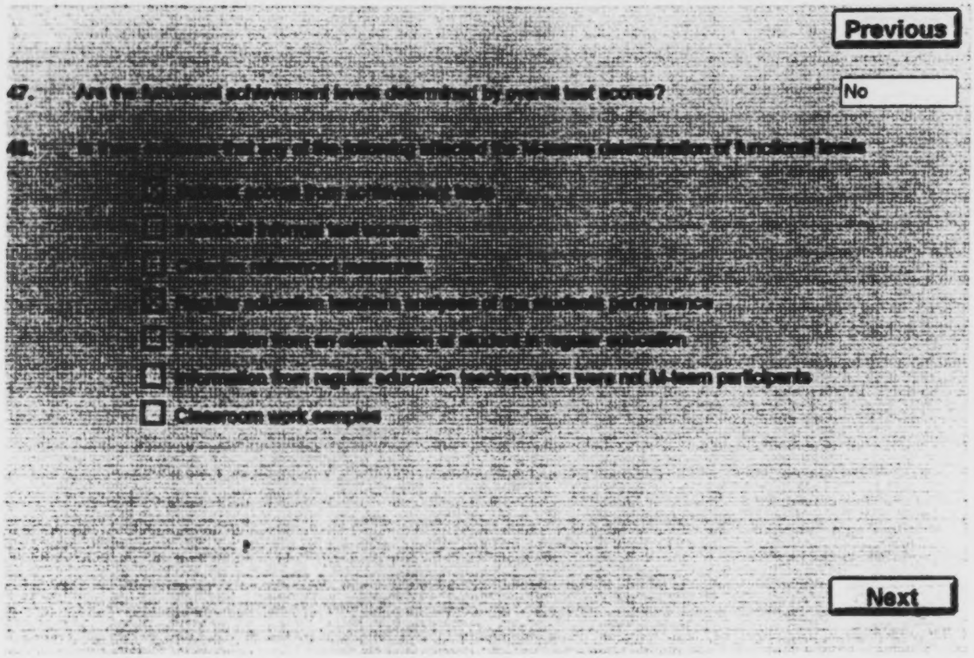

47. Are the functional achievement levels determined by overall test scores? No

48. [illegible] that any of the following affected the M-teams determination of functional levels

☒ Standard scores from achievement tests
☐ [illegible] test scores
☐ [illegible]
☒ Regular education teachers analyses of the students performance
☒ Information from an observation of student in regular education
☒ Information from regular education teachers who were not M-team participants
☐ Classroom work samples

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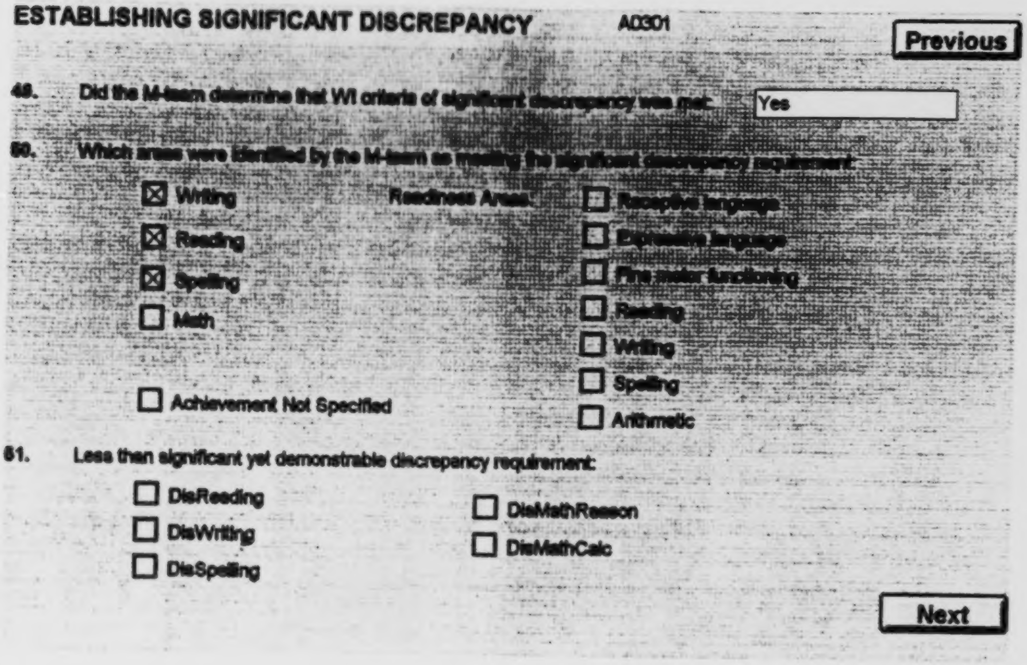

ESTABLISHING SIGNIFICANT DISCREPANCY A0301

49. Did the M-team determine that WI criteria of significant discrepancy was met: Yes

50. Which areas were identified by the M-team as meeting the significant discrepancy requirement:

- ☒ Writing
- ☒ Reading
- ☒ Spelling
- ☐ Math
- ☐ Achievement Not Specified

Readiness Areas:

- ☐ Receptive language
- ☐ Expressive language
- ☐ Fine motor functioning
- ☐ Reading
- ☐ Writing
- ☐ Spelling
- ☐ Arithmetic

51. Less than significant yet demonstrable discrepancy requirement:

- ☐ DisReading
- ☐ DisWriting
- ☐ DisSpelling
- ☐ DisMathReason
- ☐ DisMathCalc

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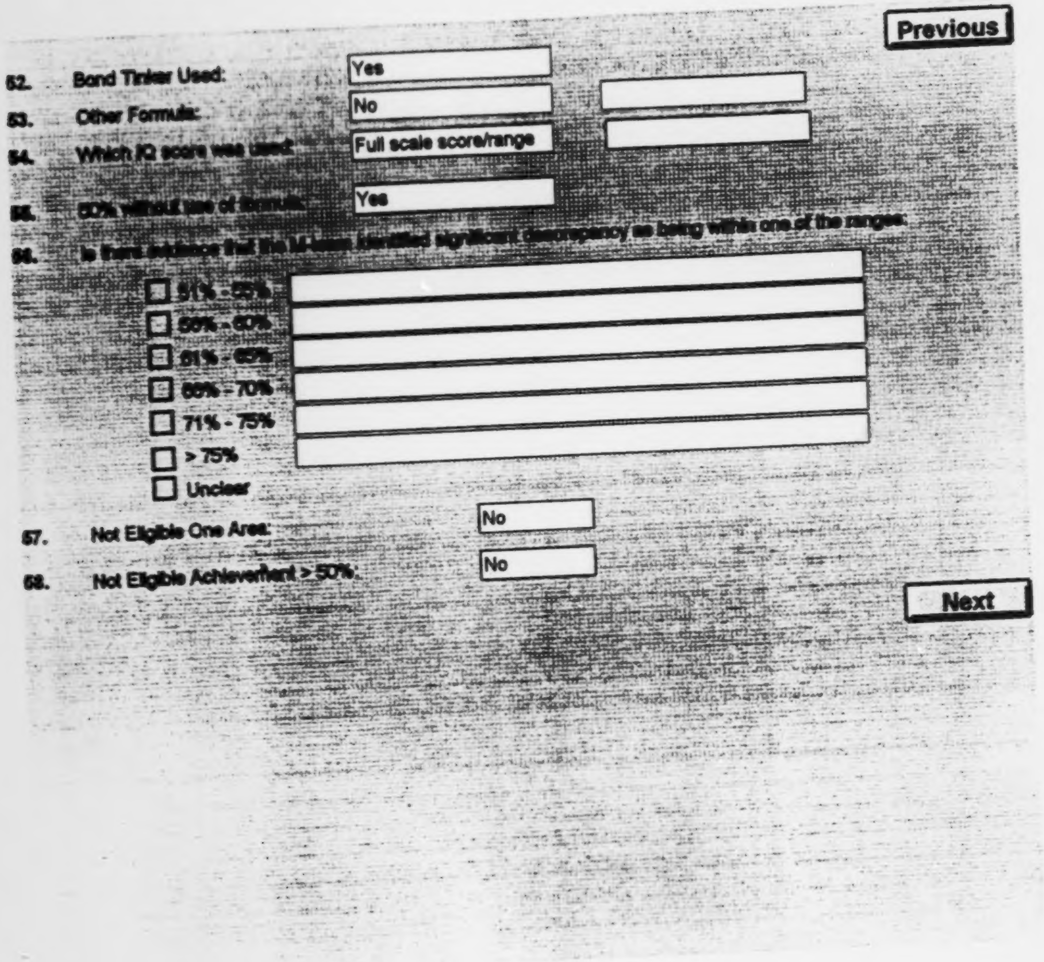

52. Bond Tinker Used: Yes

53. Other Formula: No

54. Which IQ score was used: Full scale score/range

55. 50% without use of formula: Yes

56. Is there evidence that the M-team identified significant discrepancy as being within one of the ranges:

- ☐ 51% - 55%
- ☐ 56% - 60%
- ☐ 61% - 65%
- ☐ 66% - 70%
- ☐ 71% - 75%
- ☐ > 75%
- ☐ Unclear

57. Not Eligible One Area: No

58. Not Eligible Achievement > 50%: No

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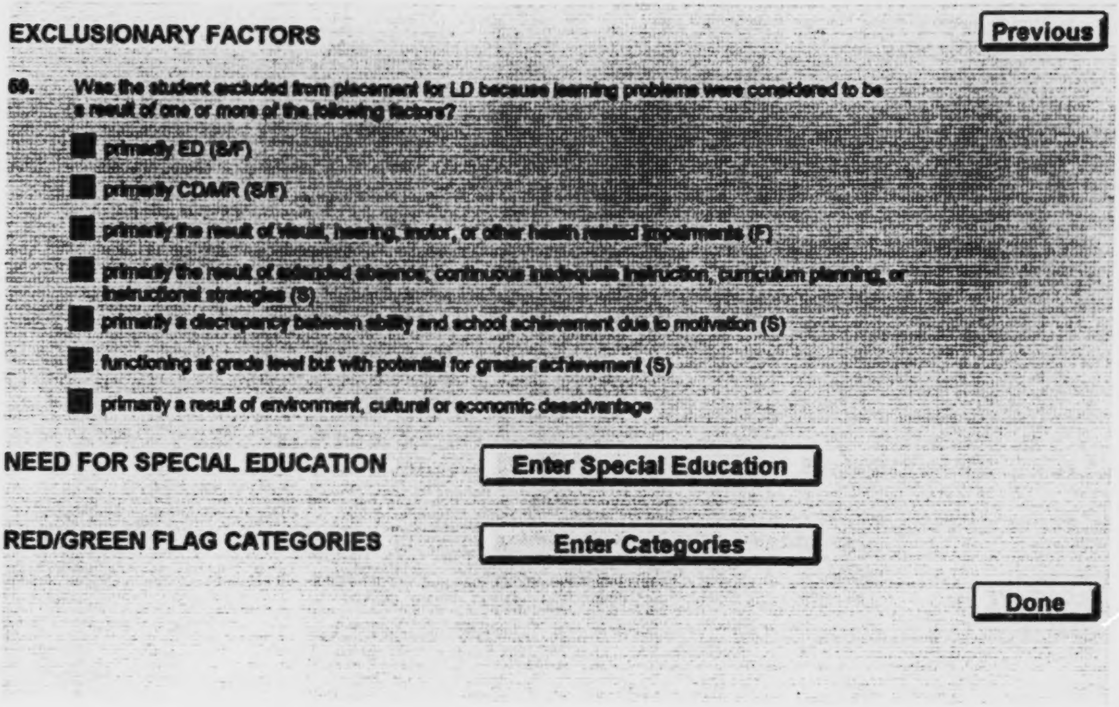

EXCLUSIONARY FACTORS

59. Was the student excluded from placement for LD because learning problems were considered to be a result of one or more of the following factors?

- ■ primarily ED (S/F)
- ■ primarily CD/MR (S/F)
- ■ primarily the result of visual, hearing, motor, or other health related impairments (F)
- ■ primarily the result of extended absence, continuous inadequate instruction, curriculum planning, or instructional strategies (S)
- ■ primarily a discrepancy between ability and school achievement due to motivation (S)
- ■ functioning at grade level but with potential for greater achievement (S)
- ■ primarily a result of environment, cultural or economic deadvantage

NEED FOR SPECIAL EDUCATION

RED/GREEN FLAG CATEGORIES

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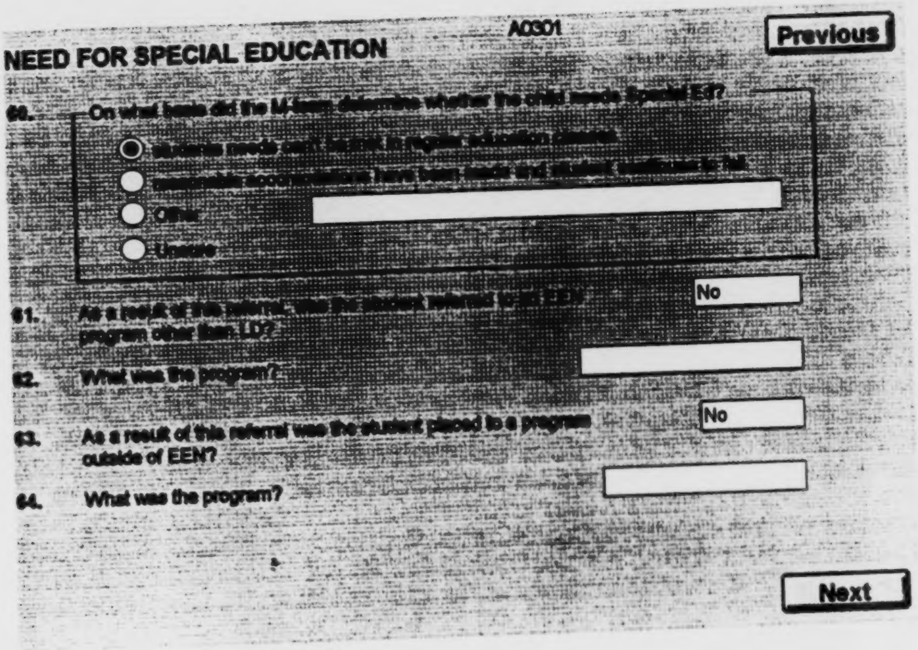

NEED FOR SPECIAL EDUCATION

60. On what basis did the M-team determine whether the child needs Special Ed?

● students needs can't be met in regular education classes
○ reasonable accommodations have been made and student continues to fail
○ Other
○ Unsure

61. As a result of this referral, was the student referred to an EEN program other than LD? No

62. What was the program?

63. As a result of this referral was the student placed to a program outside of EEN? No

64. What was the program?

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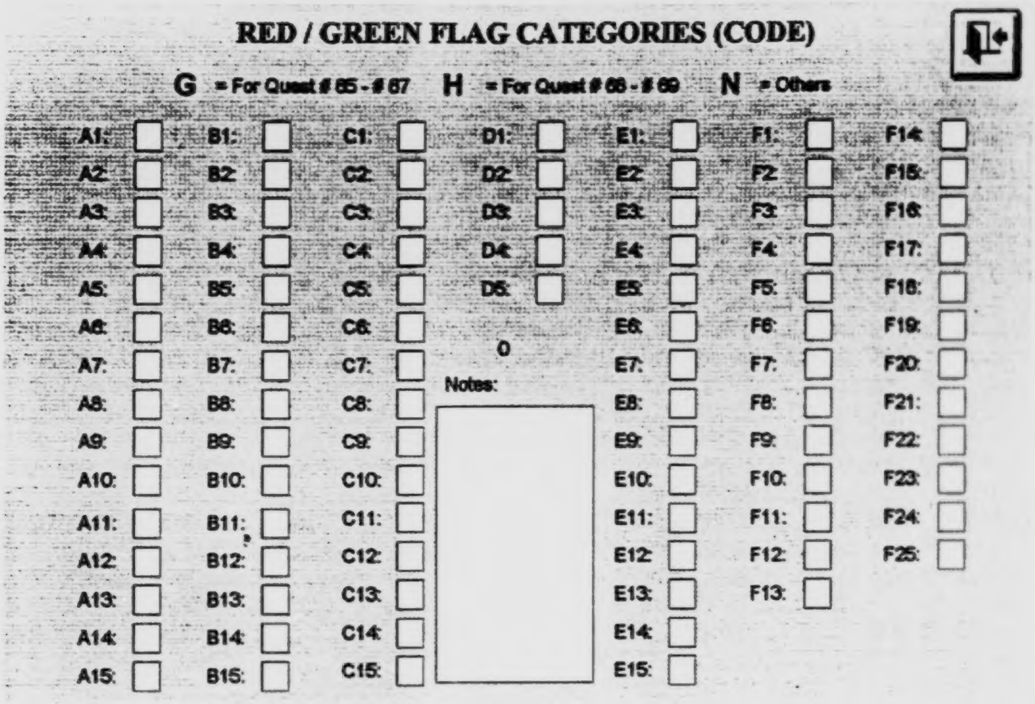

RED / GREEN FLAG CATEGORIES (CODE)

G = For Quest # 65 - # 67 **H** = For Quest # 68 - # 69 **N** = Others

A1: ☐
A2: ☐
A3: ☐
A4: ☐
A5: ☐
A6: ☐
A7: ☐
A8: ☐
A9: ☐
A10: ☐
A11: ☐
A12: ☐
A13: ☐
A14: ☐
A15: ☐

B1: ☐
B2: ☐
B3: ☐
B4: ☐
B5: ☐
B6: ☐
B7: ☐
B8: ☐
B9: ☐
B10: ☐
B11: ☐
B12: ☐
B13: ☐
B14: ☐
B15: ☐

C1: ☐
C2: ☐
C3: ☐
C4: ☐
C5: ☐
C6: ☐
C7: ☐
C8: ☐
C9: ☐
C10: ☐
C11: ☐
C12: ☐
C13: ☐
C14: ☐
C15: ☐

D1: ☐
D2: ☐
D3: ☐
D4: ☐
D5: ☐

0

Notes:

E1: ☐
E2: ☐
E3: ☐
E4: ☐
E5: ☐
E6: ☐
E7: ☐
E8: ☐
E9: ☐
E10: ☐
E11: ☐
E12: ☐
E13: ☐
E14: ☐
E15: ☐

F1: ☐
F2: ☐
F3: ☐
F4: ☐
F5: ☐
F6: ☐
F7: ☐
F8: ☐
F9: ☐
F10: ☐
F11: ☐
F12: ☐
F13: ☐

F14: ☐
F15: ☐
F16: ☐
F17: ☐
F18: ☐
F19: ☐
F20: ☐
F21: ☐
F22: ☐
F23: ☐
F24: ☐
F25: ☐

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Appendix L

Example of Data Confirmation Process

Analysis B As Example
Was the student not placed because of only one area of significant discrepancy ?

557= number of students not placed
-121= students with all IQ scores below 90
436= students with any IQ score above 90

+11= add back those with IQ scores below 90 that M-team called average
447= total, IQ or judgment, of students with average functioning

-26= those not placed because of one or more exclusionary factors
421= those that were not non-placed because of below average functioning or for exclusionary reasons

students not placed because of having only one area
of significant discrepancy. This was determined by
identifying within the 421 records all those students
that showed a significant discrepancy in one area
only (31) and then identifying and adding back those
students that had a significant discrepancy in math
33= but not a second demonstrable discrepancy in
another area (+2) for a total of 33.

388 = students with no intrachild variability, LD but no need for service, parent rejection of placement, insufficient information within records, combinations, etc.

Students not placed because:
33 = computer calculated only one area of significant discrepancy
35 = evaluators judged to have only one area of significant discrepancy (Question # 57 on Profile)

Appendix M

Survey of Special Education Directors

LD ELIGIBILITY CRITERIA STUDY

QUESTIONS FOR PARTICIPATING SCHOOL DISTRICTS

Name of School District ________________________________

Person Completing Questionnaire ____________________________

1. Number of students enrolled in district ____________________

2a. Number of students referred for LD evaluations in 1994-95:
Total ______ Males _______ Females _________

2b. Number of students in question 2a who were placed in LD programs
Total ______ Males _______ Females _________

2c. Number of students in question 2a with full scale IQ scores below 90 who were placed in LD programs
Total ______ Males _______ Females _________

2d. Number of students in question 2a with full scale IQ scores below 90 who were not placed in LD programs
Total ______ Males _______ Females _________

3a. Please indicate the typical composition of the LD multidisciplinary team at the elementary level (Please check all that apply)

Classroom teacher ____
LD teacher ____
Diagnostic teacher ____
(person completing evaluations, if other than LD teacher) ____
School Psychologist ____
Counselor ____
School Nurse ____
School Social Worker ____
Parent(s) ____

Principal ____
Special Education Director/Designee ____
PT/OT ____
Speech Therapist ____
Other (specify)
____
____
____
____

3b. Please indicate the typical composition of the multidisciplinary team at the middle school/junior high level (Please check all that apply)

Classroom teacher ____
LD teacher ____
Diagnostic teacher
(person completing evaluations,
if other than LD teacher) ____
School Psychologist ____
Counselor ____
School Nurse ____
School Social Worker ____
Parent(s) ____

Principal ____
Special Education
Director/Designee ____
PT/OT ____
Speech Therapist ____
Other (specify)
____
____
____
____

3c. Please indicate the typical composition of the multidisciplinary team at the high school level (Please check all that apply)

Classroom teacher ____
LD teacher ____
Diagnostic teacher
(person completing evaluations,
if other than LD teacher) ____
School Psychologist ____
Counselor ____
School Nurse ____
School Social Worker ____
Parent(s) ____

Principal ____
Special Education
Director/Designee ____
PT/OT ____
Speech Therapist ____
Other (specify)
____
____
____
____

4. Who usually chairs the multidisciplinary team at the elementary level?

____

middle school/junior high level?

____

high school?

____

5a. Please describe the intellectual functioning criteria used by the district to document the potential for average functioning.

____
____
____
____
____
____
____

5b. Is this policy in written form? ___ yes (please attach) ___ no

6a. What academic areas are used to determine the areas in which there is a severe discrepancy? Is there an established order for examining these? If so, please describe.

6b. Is this policy in written form? ___ yes (please attach) ___ no

7a. Please describe the process by which the need for special education is determined.

7b. Is this policy in written form? ___ yes (please attach) ___ no

8a. Please indicate the tests that are available in the district for determining the level of intellectual functioning of students referred for LD evaluations.

8b. Please indicate the tests that are available in the district for determining the level of academic achievement of students referred for LD evaluations.

9a. Is a standard battery for measuring intellectual functioning recommended for use in the district? ____ yes ____ no

9b. If yes, please specify the battery

10a. Is a standard battery for measuring academic achievement recommended for use in the district? ____ yes ____ no

10b. If yes, please specify the battery

11a. Is it a policy within your district to utilize building assistance teams or student support teams to assist teachers in developing/implementing pre-referral interventions?
____ yes ____ no

11b. If yes, please indicate the percentage of schools at each level that utilize such teams
Elementary____% Middle school/junior high ____% High school____ %

11c. If yes, please indicate the composition of these teams (at each level):

11d. If yes, please describe the type of training that has been provided to team members

12a. Is collaboration between regular and special education or inclusion implemented on a regular basis in
elementary schools ____ yes ____ no (if yes, indicate % of schools ____%)
middle/junior high ____ yes ____ no (if yes, indicate % of schools ____%)
high schools ____ yes ____ no (if yes, indicate % of schools ____%)

12b. If yes to 12a, please describe the nature of the collaboration or inclusion (for example, team-teaching, pre-referral activities, collaboration with individual students).

13. Please indicate your suggestions for improving Wisconsin LD eligibility criteria and identification procedures.

Your assistance in completing this questionnaire is greatly appreciated!

(e) *Speech and language handicaps.* 1. Speech and language handicaps are characterized by a delay or deviance in the acquisition of prelinguistic skills, or receptive skills or expressive skills or both of oral communication. The handicapping condition does not include speech and language problems resulting from differences in paucity of or isolation from appropriate models.

a. Special considerations include:

i. Elective or selective mutism or school phobia shall not be included except in cooperation with programming for the emotionally disturbed.

ii. Documentation of a physical disability resulting in a voice problem, e.g., nodules, cleft palate, etc., or an expressive motor problem, e.g., cerebral palsy, dysarthria, etc., shall not require the determination of a handicapping condition in speech and language.

(f) *Learning disabilities.* 1. The handicapping condition of learning disabilities denotes severe and unique learning problems due to a disorder existing within the child which significantly interferes with the ability to acquire, organize or express information. These problems are manifested in school functioning in an impaired ability to read, write, spell or arithmetically reason or calculate.

2. Criteria for identification. The child shall meet the criteria in subd. 2. a. and b. to be considered as having the handicapping condition of learning disabilities.

a. A child whose primary handicapping condition is due to learning disabilities shall exhibit a significant discrepancy between functional achievement and expected achievement. A significant discrepancy is defined as functional achievement at or below 50% (.5) of expected achievement.

i. The child when first identified, shall have a significant discrepancy in functional achievement in 2 or more of the readiness or basic skill areas of math, reading, spelling and written language. To determine a significant discrepancy in the readiness areas the M-team shall consider the child's receptive and expressive language and fine motor functioning. A significant discrepancy in the single area of math, accompanied by less significant, yet demonstrable discrepancies in other basic skill areas may satisfy the academic eligibility criteria.

ii. Functional achievement is defined as the child's instructional level in readiness and basic skill areas. Determination of functional achievement shall be based on a combination of formal and informal individualized tests, criterion - referenced measures, observations and an analysis of classroom expectations in basic skill areas.

iii. The following formula shall be used to determine expected achievement: I.Q. x years in school. Years in school is defined as the number of years of school completed since enrollment in 5-year-old kindergarten. A child who entered first grade without benefit of kindergarten should have a factor of one year added to that child's total years in school for computational purposes.

iv. The following formula yields a grade score to which the child's previously determined functional achievement level is compared. If the

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functional achievement level is at or below the grade score derived from the formula a significant discrepancy exists:

I.Q. x Years in School x .5 = Grade Score (50% of expected achievement). This formula is inappropriate for children who have not completed 2 years in school. Children entering kindergarten or first grade who are achieving in readiness areas one or more years below expected achievement levels for their chronological age may be considered as having a significant discrepancy between their functional and expected achievement. See Appendix J for examples.

v. A child whose functional achievement approaches but is not at or below 50% of expected achievement may be considered to have met the academic functioning criterion if the child demonstrates variable performance between the sub-skills required for each of the areas of reading, writing, spelling, arithmetical reasoning or calculation and if the child meets all the other criteria used to identify the handicapping condition of learning disabilities. This determination shall be based on the M-team's collective judgment and the rationale shall be documented in the M-team report.

vi. In attendance centers where the number of children functioning at or below 50% of expected achievement exceeds that which might be anticipated for the general population, additional efforts shall be made to substantiate that the child's functional achievement level is due to a disorder existing within the child and not due to those conditions enumerated in sub. (2).

vii. Evidence shall exist that the learning disabilities are primarily attributable to a deficit within the child's learning system. Such evidence may include average or above average ability in some areas. In documenting this in-child variability academic and non-academic behaviors shall be considered.

b. Children whose primary handicapping condition is due to learning disabilities shall exhibit normal or potential for normal intellectual functioning.

i. This measure of intellectual functioning may be established by a score above a minus one standard deviation on a single score intelligence instrument, or by a verbal or performance quotient of 90 or above on a multiple score intelligence instrument.

ii. The instrument used to establish this measure shall be recognized as a valid and comprehensive individual measure of intellectual functioning.

iii. If there is reason to suspect the test results are not true indices of a particular child's ability, then clarification of why the results are considered invalid shall be provided. Previous experience, past performance and other supportive data that intellectual functioning is average shall be present and documented in written form.

iv. There may exist rare cases of severe language involvement which detrimentally affect the learning disabled child's ability to perform adequately on intelligence tests given the language emphasis of these instruments. In these rare situations the importance of the intellectual criteria may be reduced given substantial evidence to indicate average ability.

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3. Learning problems, when primarily due to the following, shall be excluded from consideration as learning disabilities:

a. The other handicapping conditions specified in s. 115.76 (3), Stats.

b. Learning problems resulting from extended absence, continuous inadequate instruction, curriculum planning, or instructional strategies.

c. Discrepancies between ability and school achievement due to motivation.

d. Functioning at grade level but with potential for greater achievement.

(g) *Emotional disturbance.* 1. Classification of emotional disturbance as a handicapping condition is determined through a current, comprehensive study of a child, ages 0 through 20, by an M-team.

2. Emotional disturbance is characterized by emotional, social and behavioral functioning that significantly interferes with the child's total educational program and development including the acquisition or production, or both, of appropriate academic skills, social interactions, interpersonal relationships or intrapersonal adjustment. The condition denotes intraindividual and interindividual conflict or variant or deviant behavior or any combination thereof, exhibited in the social systems of school, home and community and may be recognized by the child or significant others.

3. All children may experience situational anxiety, stress and conflict or demonstrate deviant behaviors at various times and to varying degrees. However, the handicapping condition of emotional disturbance shall be considered only when behaviors are characterized as severe, chronic or frequent and are manifested in 2 or more of the child's social systems, e.g., school, home or community. The M-team shall determine the handicapping condition of emotional disturbance and further shall determine if the handicapping condition requires special education. The following behaviors, among others, may be indicative of emotional disturbance:

a. An inability to develop or maintain satisfactory interpersonal relationships.

b. Inappropriate affective or behavioral response to what is considered a normal situational condition.

c. A general pervasive mood of unhappiness, depression or state of anxiety.

d. A tendency to develop physical symptoms, pains or fears associated with personal or school problems.

e. A profound disorder in communication or socially responsive behavior, e.g., autistic-like.

f. An inability to learn that cannot be explained by intellectual, sensory or health factors.

g. Extreme withdrawal from social interaction or aggressiveness over an extended period of time.

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Appendix N

Letter to School Districts

University of Wisconsin

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RIVER FALLS

River Falls, WI 54022

Department of Counseling and School Psychology
715-425-3889 FAX 715-425-0622

Dear

The Wisconsin Department of Public Instruction is currently engaged in a research study of how school districts actually apply the the state LD eligibility criteria. This study is the result of a U.S. Department of Education ruling in 1994 that Wisconsin's LD eligibility criteria do not conform to the federal LD definition. In response to that ruling, DPI asked for reconsideration of the U.S. Department of Education decision and proposed that a study be conducted of how school districts actually apply the state LD eligibility criteria. That proposal was accepted and the study is in progress.

Two of the research questions that are part of the study are:

1. After M-teams determine that children meet the criteria for the handicapping condition of LD, how do they determine whether the child needs special education?

2. Do parents, teachers, and administrators have suggestions for ways in which the Wisconsin LD criteria and identification procedures can be improved? If so, what are their suggestions?

In arriving at answers to these questions, we are seeking input from parents and a variety of school personnel including teachers, administrators, pupil services personnel, special education personnel, and school board members. We would appreciate your completing the enclosed form and returning it to us in the enclosed envelope or by fax to Doug Smith 715 425-0622 at your earliest convenience. We need your response by February 5, 1996. To assist you in responding to this request, a summary of Wisconsin's LD eligibility criteria and the actual criteria are enclosed.

Should you have questions about the study or these research questions, please feel free to contact Doug Smith at 715 425-3889. We greatly appreciate your participation in this phase of the study.

With best regards,

Harold Thorpe Bert Chiang
Principal Investigators
University of Wisconsin-Oshkosh

Doug Smith
Research Consultant
University of Wisconsin-River Falls

1. Please indicate your role/position in the school setting:

Parent ____________
Parent advocate ____________
Classroom teacher ____________
LD teacher ____________
Diagnostic teacher
(person completing evaluations,
if other than LD teacher) ____________
School psychologist ____________
Counselor ____________

Principal ____________
Special Education
director/designee ____________
PT/OT ____________
Speech therapist ____________
School social worker ____________
School nurse ____________
School board member ____________
School district
administrator ____________

2. If a student meets the criteria for learning disabilities, how is it determined whether the child needs special education? ____________________

3. What are your suggestions for improving Wisconsin LD eligibility criteria and identification procedures? ____________________

Thank you for your participation in this project!

Summary of Wisconsin's LD Eligibility Criteria

Definition: The handicapping condition of learning disabilities denotes severe and unique learning problems due to a disorder existing within the child which significantly interferes with the ability to acquire, organize or express information. These problems are manifested in school functioning in an impaired ability to read, write, spell or arithemetically reason or calculate.

Criteria for identification:

Academic functioning: a significant discrepancy between functional achievement and expected achievement. A significant discrepancy is defined as functional achievement at or below 50% (.5) of expected achievement. The child when first identified, shall have a significant discrepancy in functional achievement in 2 or more of the readiness or basic skill areas of math, reading, spelling and written language. To determine a significant discrepancy in the readiness areas the M-team shall consider the child's receptive and expressive language and fine motor functioning. A significant discrepancy in the single area of math, accompanied by less significant, yet demonstrable discrepancies in other basic skill areas may satisfy the academic eligibility criteria. The following formula shall be used to determine expected achievement: IQ x years in school. Years in school is defined as the number of years of school completed since enrollment in 5-year-old kindergarten. The formula (IQ x years in school x .5 = grade score) yields a grade score to which the child's functional achievement level is compared. A child whose functional achievement approaches but is not at or below 50% of expected achievement may be considered to have met the academic functioning criterion if the child demonstrates variable performance between the sub-skills required for each of the areas of reading, writing, spelling, arithemetical reasoning or calculation and if the child meets all the other criteria used to identify the handicapping condition of learning disabilities.

Intellectual functioning: normal or potential for normal intellectual functioning. This may be established by a score above a minus one standard deviation on single score intelligence instrument, or by a verbal or performance quotient of 90 or above on a multiple score intelligence instrument. It there is reason to suspect the test results are not true indices of a particular child's ability, then clarification of why the results are considered invalid shall be provided. Previous experience, past performance and other supportive data that intellectual functioning is average shall be present and documented in written form. There may exist rare cases of severe language involvement which detrimetnally affect the learning disabled child's ability to perform adequately on intelligence tests given the language emphasis of these instruments. In these rare situations the importance of the intellectual criteia may be reduced given substantial evidence to indicate average ability.

Appendix O

Student Identification Code Numbers

Appendix O

Interpreting Student Code Numbers

The code number always has eight places, e.g., A0501015

The capital letter identifies the group:

A= low prevalence group
B= average prevalence group
C= high prevalence group
D= multiple complaint group
E= Parent nominated group

The first two digits identify the school district

The third and fourth digits identify the school within that district

The last three digits identify the student

Appendix P

Wisconsin Compared to Iowa: IQ Scores Below 86

Appendix P

IQ Scores of Students who are Eligible for LD Services

Wisconsin Compared to Iowa: Students eligible for LD classrooms having IQ full scale scores of 85 or less

Full scale scores were obtained from different IQ test results. The Iowa study reported that 93% of the scores were the result of Wechsler scales and 7% the result of Stanford-Binet scores. Wisconsin results represent 85.59% Wechsler scores and 14.41% other, e. g., Stanford-Binet, KABC, etc.

Iowa = 14%
Wisconsin
Random Group = 20.82%
Multiple Complaint Group = 17.41%

Iowa information is taken from:

Kavale, K. A., & Reese, J. H. (1992). The character of learning disabilities: An Iowa profile. *Learning Disabilities Quarterly*, *15*, 74-94.

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Appendix Q

Special Education Directors' Responses to School District Survey

LEARNING DISABILITIES ELIGIBILITY CRITERIA STUDY
Responses to School District Survey
by Special Education Directors
February 1996

		Mean	Std. Dev.	Range
1. District enrollment:				
Entire sample		5935	18518	390-103000
Random districts		2052	2071	390-9271
Nonrandom districts		25349	43532	2872-103000
2. Total LD referrals for 1994-95				
Entire sample		41.31	35.91	7-150
Random districts		31.32	21.40	7- 88
Nonrandom districts		103.75	48.35	62-150
Male LD referrals for 1994-95				
Entire sample	(64%)	26.28	23.40	5-100
Random districts	(64%)	20.16	14.72	5- 54
Nonrandom districts	(62%)	64.50	33.41	35-100
Female LD referrals for 1994-95				
Entire sample	(36%)	15.03	13.12	2- 55
Random districts	(36%)	11.16	7.58	2- 34
Nonrandom districts	(38%)	39.25	15.46	25- 55
2b. Number of students placed in LD				
Entire sample		20.34	17.26	2- 80
Random districts		16.20	11.00	2- 47
Nonrandom districts		46.25	27.84	21- 80

52% of referrals placed in LD for random districts and 45% for nonrandom districts.

		Mean	Std. Dev.	Range
Number of male students placed in LD				
Entire sample	(67%)	13.72	11.99	2- 52
Random districts	(68%)	11.00	8.19	2- 33
Nonrandom districts	(66%)	30.75	18.89	12- 52
Number of female students placed in LD				
Entire sample	(33%)	6.62	5.75	0- 28
Random districts	(32%)	5.20	3.56	0- 14
Nonrandom districts	(34%)	15.50	9.26	8- 28
2c. Number of students placed with IQ scores below 90				
Entire sample		6.35	5.45	0- 20
Random districts		6.22	5.72	0- 20
Nonrandom districts		7.33	3.06	4- 10

53% of students with IQ scores below 90 placed in LD programs in random districts versus 42% in nonrandom districts

Number of male students placed with IQ scores below 90				
Entire sample	(59%)	3.69	3.66	0- 14
Random districts	(58%)	3.61	3.82	0- 14
Nonrandom districts	(59%)	4.33	2.52	2- 7
Number of female students placed with IQ scores below 90				
Entire sample	(41%)	2.65	7.10	0- 9
Random districts	(42%)	2.61	7.71	0- 9
Nonrandom districts	(41%)	3.48	4.61	0- 9
2d. Number of students not placed with IQ scores below 90				
Entire sample		6.04	5.35	0- 19
Random districts		5.48	5.19	0- 19
Nonrandom districts		10.33	5.51	4- 14
Number of male students not placed with IQ scores below 90				
Entire sample	(48%)	7.88	3.35	0- 12
Random districts	(48%)	2.61	3.42	0- 12
Nonrandom districts	(48%)	5.00	7.00	3- 7
Number of female students not placed with IQ scores below 90				
Entire sample	(52%)	3.15	2.75	0- 9
Random districts	(52%)	2.87	2.53	0- 7
Nonrandom districts	(52%)	5.33	4.04	1- 9

3. Composition of LD multidisciplinary team

	Elementary		Middle School		High School	
	N	%	N	%	N	%
Classroom Teacher	30	100%	30	100%	27	90%
LD Teacher	28	93%	29	97%	29	97%
Diagnostic teacher (person completing evaluations, if other than LD teacher)	6	21%	5	23%	5	13%
School Psychologist	30	100%	30	100%	30	100%
Counselor	6	21%	10	35%	16	57%
School Nurse	2	7%	2	7%	1	4%
School Social Worker	4	14%	4	14%	2	7%
Parent(s)	21	72%	19	66%	19	66%
Principal	13	46%	11	39%	11	39%
Special Education Director/ Designee	4	14%	5	18%	5	18%
PT/OT	3	11%	2	7%	1	4%
Speech Therapist	4	14%	4	14%	4	14%

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4. Who usually chairs the multidisciplinary team?

		Entire Sample		Random Districts		Nonrandom Districts	
Elementary:	School Psychologist	18	(60%)	16	(64%)	2	(40%)
	LD teacher	3	(10%)	3	(12%)	0	(0%)
	Diagnostic Teacher	1	(3%)	0	(0%)	1	(20%)
	Counselor	2	(7%)	1	(4%)	1	(20%)
	Case Manager	2	(7%)	1	(4%)	1	(20%)
	Dir of Sp Ed/SP	1	(3%)	1	(4%)	0	(0%)
	SP or LD teacher	1	(3%)	1	(4%)	0	(0%)
	SP or Social Wrkr	1	(3%)	1	(4%)	0	(0%)
	Principal	1	(3%)	1	(4%)	0	(0%)
Middle School:	School Psychologist	18	(60%)	16	(64%)	2	(40%)
	LD Teacher	3	(10%)	3	(12%)	0	(0%)
	Diagnostic Teacher	1	(3%)	0	(0%)	1	(20%)
	Counselor	2	(7%)	1	(4%)	1	(20%)
	Case Manager	2	(7%)	1	(4%)	1	(20%)
	Dir of Sp Ed/SP	1	(3%)	1	(4%)	1	(0%)
	SP or LD teacher	1	(3%)	1	(4%)	0	(0%)
	SP or Social Wrkr	1	(3%)	1	(4%)	0	(0%)
	Associate Principal	1	(3%)	1	(4%)	0	(0%)
High School:	School Psychologist	18	(60%)	16	(64%)	2	(40%)
	LD Teacher	3	(10%)	3	(12%)	0	(0%)
	Diagnostic Teachr	1	(3%)	0	(0%)	1	(20%)
	Counselor	2	(7%)	1	(4%)	1	(20%)
	Case Manager	2	(7%)	1	(4%)	1	(20%)
	Dir of Sp Ed/SP	1	(3%)	1	(4%)	0	(0%)
	SP or LD teacher	1	(3%)	1	(4%)	0	(0%)
	SP or Social Wrkr	1	(3%)	1	(4%)	0	(0%)
	Associate Principal	1	(3%)	1	(4%)	0	(0%)

5a/b. Intellectual functioning criteria

23 of the districts (77%) use PI 11 language
Remainder of the districts use a variation of this language.

18 districts (64%) have the policy in written form and 10 districts (36%) do not.

6a/b. Academic areas used to establish severe discrepancy

26 of the districts (87%) use PI 11 language
4 of the districts (13%) specify reading, spelling, math, and written language.

24 of the districts (80%) have no order for examining the areas of discrepancy. The other districts usually focus on reading initially.

18 districts (62%) have the policy in written form and 11 districts (38%) do not.

7a/b. Process for determining the need for special education

The consensus of responses is that the existence of a disability is confirmed and then the multidisciplinary team considers if a need for special education exists. Factors that are considered include: success of previous interventions in regular education; failing grades in regular education; severe discrepancy is not correctable without special education and related services; lack of progress in regular education; adequacy of previous interventions; M-team members are asked if a need for special education exists.

14 districts (47%) have this policy in written form and 16 districts (53%) do not.

8a. Tests that are available for determining the level of intellectual functioning for students referred for possible learning disabilities:

Test	No. of Districts		
	(a)	(b)	(c)
Wechsler Intelligence Scale for Children-III	28	24	4
Wechsler Intelligence Scale for Children-Revised	4	3	1
Wechsler Preschool and Primary Scale of Intelligence-Revised	22	19	3
Wechsler Preschool and Primary Scale of Intelligence	1	1	0
Wechsler Adult Intelligence Scale-Revised	22	20	2
Wechsler Adult Intelligence Scale	1	1	0
Stanford Binet Intelligence Scale: Fourth Edition	23	18	5
Stanford Binet Intelligence Scale: LM	2	2	0
Kaufman Assessment Battery for Children	21	17	4
Differential Ability Scales	3	2	1
Test of Nonverbal Intelligence	10	10	0
Comprehensive Test of Nonverbal Intelligence	1	1	0
Woodcock Johnson Psychoeducational Battery-Revised (Cognitive)	7	7	0
(Spanish version of WJR-Cognitive)	1	1	0
McCarthy Scales of Children's Abilities	8	7	1
Kaufman Brief Intelligence Test	8	7	1
Slosson Intelligence Test-Revised	4	4	0
Battelle Developmental Inventory	2	2	0
Columbia Mental Maturity Scale	1	1	0
Bayley Scales of Infant Development	2	2	0
Leiter	4	4	0
Raven Progressive Matrices	1	1	0
Matrix Analogies Test	1	1	0
Informal Piagetian Assessment	1	1	0
Detroit Tests of Learning Ability	1	1	0
French Pictorial Test of Intelligence	1	1	0
Cognitive Levels Test	1	1	0
Vineland Scales	1	1	0
Wechsler Individual Achievement Test	1	1	0

Note: (a) entire sample of 30 school districts
(b) random sample of 25 school districts
(c) nonrandom sample of 5 school districts

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8b. Tests that are available for determining the level of academic achievement for students referred for possible learning disabilities:

Test	No. of Districts		
	(a)	(b)	(c)
Woodcock-Johnson Psychoeducational Battery-Revised (Achievement)	27	22	5
Key Math	23	21	2
Wechsler Individual Achievement Test	18	14	4
Woodcock Reading Mastery Test	18	16	2
Kaufman Test of Educational Achievement (Comprehensive)	17	15	2
Kaufman Test of Educational Achievement (Brief form)	4	4	0
Test of Written Language-3 (TOWL-3)	16	14	2
Test of Written Spelling-3 (TWS-3)	14	13	1
Wide Range Achievement Test-R/Wide Range Achievement Test 3	15	13	2
Test of Early Reading Ability-2 (TERA-2)	14	12	2
Brigance	13	11	2
Test of Early Mathematics Ability-2 (TEMA-2)	11	9	2
Peabody Individual Achievement Test/PIAT-R	11	10	1
Test of Early Written Language-2 (TEWL-2)	7	6	1
Test of Reading Comprehension-3 (TORC-3)	6	6	0
Test of Language Development-2 (TOLD-2)	5	5	0
Peabody Picture Vocabulary Test-Revised (PPVT-R)	4	4	0
Gray Oral Reading Test	4	3	1
Developmental Test of Visual Motor Integration (VMI)	4	4	0
Curriculum Based Assessment	4	3	1
Boder Test of Reading-Spelling	4	4	0
Norris Educational Achievement Test (NEAT)	3	2	1
Test of Written Expression (TOWE)	3	3	0
Stanford Diagnostic Reading	2	2	0
Test of Kindergarten/First Grade Readiness Skills	2	1	1
BASIS	2	2	0
Test of Nonverbal Intelligence (TONI)	2	2	0
KSEALS	2	2	0
Bracken Test of Basic Concepts	2	2	0
EK Wall Reading Inventory	1	1	0
ADDES (School)	1	1	0
ADDES (Home)	1	1	0
Learning Disabilities Evaluation Scale	1	1	0
Behavior Evaluation Scale	1	1	0
Stanford Diagnostic Math Test	1	1	0
Diagnostic Screening Test Math/Reading	1	1	0
Detroit Test of Learning Aptitudes-2 (DTLA-2)	1	1	0
Slosson Oral Reading Test	1	1	0
LAP	1	1	0
DSPT	1	1	0
Kaufman Assessment Battery for Children (Achievement subtests)	2	1	1
Boehm Test of Basic Concepts	1	1	0
Goodenough Harris	1	1	0
VADS	1	1	0
Woodcock Johnson Test of Reading Comprehension	1	1	0

Dolch Word Lists	1	1	0
Informal Writing Tests	1	1	0
Test of Adolescent and Adult Language (TOAL)	1	1	0
Differential Ability Scales (Achievement subtests)	1	1	0
Ann Arbor	1	1	0
Spache Diagnostic Scales	1	0	1
Battelle Developmental Inventory	1	0	1
Basic Skills Inventory Diagnostic	1	1	0
TKFGRS	1	1	0
CELF-R	1	1	0
LET-II	1	1	0
Receptive One-Word Picture Vocabulary Test (ROWPVT)	1	1	0
Expressive One-Word Picture Vocabulary Test-Revised (EOWPVT-R)	1	1	0
OLSI	1	1	0
TOPS	1	1	0
TARO	1	1	0
ALL	1	1	0
LPT	1	1	0
Test of Auditory-Perceptual Skills (TAPS)	1	1	0
ARI	1	1	0
SPEL-2	1	1	0
ASSET	1	1	0
EW-R	1	1	0
ADT-W	1	1	0
MVPT	1	1	0
TAC	1	1	0
PDP	1	1	0
DP	1	1	0
PLT-3	1	1	0
LAPD	1	1	0
APP-R	1	1	0
Silvaroli Classroom Reading Inventory	2	2	0
Kottenmeyer Spelling Inventory	1	1	0

Note: (a) entire sample of 30 school districts
(b) random sample of 25 school districts
(c) nonrandom sample of 5 school districts

9a/b. Is a standard battery for measuring intellectual functioning recommended?

28 of the districts (93%) responded "no" and 2 districts (7%) responded "yes." One district specified the WISC-III or DAS or both and the other indicated the WISC-R was recommended.

10a/b. Is a standard battery for measuring academic achievement recommended?

25 of the districts (86%) responded "no" and 4 districts (14%) responded "yes." Two districts recommended the WJ-R, one district recommended the WJ-R Tests of Achievement or WJ Minibattery, and one district reçommended the WJ-R Form B to be given by the LD teacher and the WIAT Screener, WRAT, or WJ-R be given by the school psychologist.

11a. Is it a policy to utilize building assistance teams or student support teams to assist teachers in developing/implementing pre-referral interventions?

22 of the districts (73%) responded "yes" and 8 of the districts (27%) responded "no."

11b. Percentage of schools utilizing building assistance teams:

	Mean	Standard Deviation	Range
Elementary	83.91%	32.44	0-100
Middle school/junior high	92.73	23.34	0-100
High school	82.73	34.39	0-100

12a. Is collaboration between regular and special education or inclusion implemented on a regular basis?

	Yes	No
Elementary	27 districts (90%)	3 districts (10%)
Middle school/junior high	27 districts (90%)	3 districts (10%)
High school	26 districts (86%)	4 districts (14%)

The districts utilizing collaboration indicated the following percentages of schools were invovled:

	Mean	Standard Deviation	Range
Elementary	95.67	19.21	6-100
Middle school/junior high	96.25	12.79	50-100
High school	96.74	15.64	25-100

12b. Nature of the collaboration

In process of being compiled

13. Suggestions for improving Wisconsin's LD eligibility criteria and identification procedures: (verbatim responses from districts)

Standard scores should be considered in the eligibility criteria as opposed to a grade equivalent deficit. Need to define more clearly, the skills that should be assessed in the area of written language. Spelling should not be an area of academic dificit that is considered in the eligibility criteria. Need to clarify the eligibility criteria for young children who have been in school less than 2 years.

1. Add to rules defining what it means to need special education.
2. Make the state criteria congruent to the federal criteria.

Eliminate categorical placement for early childhood. Reading comprehension alone should be considered a disability.

We interpret LD eligibility criteria more as guidelines than as commands, and as you can see from the first page of this survey, we are not rigid on the average ability criteria, at least not insofar as the child's IQ number score. We find strict application of the Bond-Tinker formula could exclude some children, therefore clinical judgment needs to remain an accepted alternative.

I would like to have the Wisconsin LD eligibility considered the guidelines in implementing the federal criteria. The federal criteria could become integrated into PI 11.

It appears very workable and flexible as it is.

1. Use one area of discrepancy in grades K-5.
2. Use two areas of discrepancy in grades 6-12.
3. Use standard scores instead of grade equivalents to determine significant discrepancy.

Consider requirement of specific number of pre-referral interventions be done in regular education prior to student meeting WI LD eligibility criteria.

Perhaps greater flexibility with "grey area" children who display strong or obvious characteristics of a student with a learning disability. However, overall I really don't believe the average intelligence criteria should be eliminated for determining LD.

1. Allow more flexibility and professional judgment to be applied.
2. Eliminate "gray area" exclusion.
3. More emphasis placed on variability in performance as an indicator of a learning disability.
4. The exclusionary criteria do not truly differentiate between LD and not LD, thus, are unnecessary. They are too subjective and to difficult to apply.
5. Possibly higher qualifications for evaluators.
6. Clarification needed on the differences frequently found between classroom performance levels and standardized test results.
7. More specific requirements for attempting appropriate intervention with an emphasis on adaptations to curriculum and instructional strategies.

1. Allow IQ 90 but with significant discrepancy.
2. Avoid having label with LD under age 6. Use developmental disability (generic label) to document delays.

The school district is comfortable with present criteria. Would like to see regular education programs address the problems of challenged learners mandated. Regular education needs to develop more programs to assist At-Risk students.

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Continue with present exclusionary variables. Eliminate the requirement for observation in the child's regular education setting.

We believe that the use of the Bond-Tinker formula and its reliance upon the grade equivalent for establishing the discrepancy is of limited usefulness and in need of revision. We would recommend the encouragement of the use of curriculum-based measurement in documenting the discrepancy. Individual district flexibility in establishment of "norms" would be beneficial.

Adhere to the federal criteria or include two or more sub-groups in areas of deficit.

1. Needs to be more user friendly, understandable to general public especially the "average intelligence" part of it.
2. Change criteria from grade equivalent difference to standard score differences between expected and functional achievement when comparing IQ abilities versus achievement.
3. More strongly emphasize exlusionary factors.
4. De-emphasize formula-not all academic deficits significantly low are due to LD; some not significantly low due to our stringent formula are due to LD.
5. Better explain intellectual functioning-no magic numbers between eighty-five and ninety.
6. Omit "in child deficit"; include variability of functioning.
7. Use standard score comparisons as significantly low determination.
8. There is a gray area between LD and CD where students fall between the cracks. IQ needs to be adjusted for placement in these areas.
9. Rather than using the Tinker Formula and grade equivalents-use standard scores that are twenty points or more below the ability level. Example: IQ of 97, achievement scores at 77 or below.
10. Provide specific standardized form that require m-teams to provide evidence that the LD is primarily due to problems within the student learning system. Documents to a greater extent in child results. Require m-teams to speak to exclusionary factors. More specific guidelines to LEP students. Doing away with "grade equivalents" in determing discrepancy and using other comparison such as standard scores or NCEs, etc.
11. I think consistency between grades, buildings, and districts would be helpful. Our most difficult students are often transfer students. I also think a stronger criteria to rule out students who are academically deficient due to conduct disorder is needed.
12. Use the level of significance and frequency data on the discrepancy scores (standard scores) that now available on intelligence and achievement test. That have been normed on the same normative samples, statistically permits predicting achievements results and establishing statistically the degree of deviance from what is predicted, based on the individuals intelligence score.
13. More consistent training with regards to criteria so that all teachers use tests that are valid reliable for LD symptoms. State and federal resolved. Possible uniform cut off scores. Make process, procedures and criteria as scientifically/statistically researched as possible.

Drop grade scores as part of criteria and go to use of standard scores to aid in comparison of intellectual functioning/potential and current achievement.

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In my district, which is 99% minority, almost all of the students tested will qualify for LD. We do not use the exclusionary factor of poverty because if we did there would be very few that would qualify. When it comes right down to it if there is evidence of average intellectual functioning and a 50% discrepancy between expected and actual achievement with regular attendance the student will qualify for LD. My only suggestion would be to drop poverty as an exclusionary factor.

1. Wisconsin's LD eligibility criteria should require that educational staff complete pre-referral interventions prior to defining a student for a LD evaluation. These interventions should include both instructional and curriculum modifications and instructional interventions that have addressed improving the students area of needs. These pre-referral interventions would assist in determining student's eligibility and need for special education.
2. Wisconsin's LD eligibility criteria should use another method to establish the level of significant discrepancy other than the current formula IQ time years in school. times .5. This formula often times in the lower grades (2-4) is not an appropriate means to determine student's significant discrepancy level. The majority of time in these grades, the referred student's levels of current achievement are well above their significant level of discrepancy. The formula then delays students entrance to special education until a later time. The student then (continued on back page)

I think the Wisconsin criteria offers leeway for clinical judgment with respect to assessment of intelligence. I am uncomfortable with the formula for determining significant discrepancy. If a "formula" is needed, I would support using only standard scores (z scores) and a regression equation based on predicted achievement.

I don't have any specific suggestions, but I do think a review of the existing criteria would be appropriate.

Use the same language as the federal definition. Use standard scores for achievement rather than grade scores. Drop Bond-Tinker formula.

I believe the criteria used in Wisconsin need to be more restrictive since they lead to an unacceptably high number of children being labeled "handicapped."

1. More specific guidelines for which IQ number to plug into formula.
2. Consider use of standard scores for comparison of discrepancy between IQ and achievement.
3. More formal way to address "within-child deficit."
4. Include federal requirement for classroom observation in criteria.
5. Make our languager more consistent with federal definition by incorporating the statement "understanding or using language spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, ..."
6. Early identification with young children can be difficult when they have not experienced enough curriculum to be very far behind, and they may have received extra suport from parents of Chapter 1, and where the staff is

documenting pre-referral interventions. It should be easier to determine LD at the early level without strict adherence to severe discrepancy.

7. Exit criteria would be helpful also.

1. Clarification of a discrepancy based formula
2. Emphasis that informal and criterion referenced matertials are as important or significant as formalized testing
3. A clear and distinctive match between state and federal criteria
4. Clear definition of disability issue and actual need for special education by example and reference.

No response from three districts.

Verbatim Responses to Selected Questions from School District Survey of Special Education Directors

Please describe the intellectual functioning criteria used by the district to document the potential for average functioning.

> To determine the potential for average ability the school psychologist looks at the student's daily classroom functioning, reviews cumulative records, examines past evaluation information, standardized testing, consideration of splintered skills.
>
> Intellectual functioning. Children whose primary handicapping condition is due to learning disabilities shall exhibit normal or potential for normal intellectual functioning.
> This measure of intellectual functioning may be established by a score above a minus one standard deviation on a single score intelligence instrument, or by a verbal or performance quotient of 90 or above on a multiple score intelligence instrument.
> The instrument used to establish this measure shall be recognized as a valid and comprehensive individual measure of intellectual functioning.
> If there is reason to suspect the test results are not true indices of a particular child's ability, then clarification of why the results are considered invalid shall be provided.
> Previous experience, past performance and other supportive data that intellectual functioning is average shall be present and documented in written form.
> There may exist rare cases of severe language involvement which detrimentally affects the learning disabled child's ability to perform adequately on intelligence tests given the language emphasis of these instruments. In these rare situations the importance of the intellectual criteria may be reduced given substantial evidence to indicate average ability.
>
> Please refer to [Name Deleted] Policy 5500, Pages 38 and 39.
>
> Evidence of normal/average range cognitive potential as evidenced by full scale IQ score at or above 90. In the case of a full scale IQ score at or below 89, the school psychologist may assert clinical judgment of normal /average potential with IQ score depressed at this time by whatever factors need to be considered.
>
> See attached policy. The measure may be established by a score above a minus one standard deviation on a single score intelligence instrument or by a verbal or performance quotient of 90 or above on a multiple score intelligence instrument. If there is reason to suspect the tests are not true indices of a particular child's ability, then clarification of why the results are invalid is pursued. There may exist severe language involvement which detrimentally affects the learning disabled child's performance. In these situations the importance of the intellectual criteria may be reduced given substantial evidence to indicate average ability.

A score above a minus one standard deviation on a single score intelligence instrument or by a verbal or performance quotient of 90 or above on a multiple score intelligence instrument ... other supportive data ... that intellectual functioning is average shall be present and documented in written form.

Child must exhibit normal or potential for normal intellectual functioning on a recognized valid and comprehensive individual measure of intellectual functioning. If it is suspected that test results are not true indices of child's ability, clarification of why results are not valid are provided (previous experience, past performance, or other supportive data of average intellectual functioning).

Criteria used is PI 11: 35 (2) (f) part 2.b. which states the criteria for identification in regards to intellectual functioning. Psychologist would consult this chapter and make necessary documentation in report as to the presence of average intellectual functioning, or in the absence of such, documentation of reasons why average intellectual potential is suspected.

Tests are provided in native language; selected to be racially and culturally unbiased; validated for specific purpose for which they are used; and are administered by trained personnel in accordance with the instruction provided by the producer. Tests are also selected in order to ensure that any sensory, manual or speaking impairments are not negatively affecting the measure of achievement or cognitive skills.

A verbal or performance IQ of 90 or above. If IQ is not felt to be accurate, a nonverbal IQ maybe given.

Normal or potential for normal intellectual functioning: Score above a minus one *SD* on single score IQ test or Verbal or Performance score of 90 or above on multiple score IQ test. If the results suspected not to be accurate indices, then previous experience, past performance, and other supportive data are considered.

IQ at 90 or above or observations of average intellectual functioning by the M-team. Variability of performance within WISC III and achievement measures.

-Use of multiple instruments when necessary
-Average subtest scores on intelligence tests
-Examination of Adaptive Behavior development/functioning in other settings
-Use of instruments which provide standard scores highly correlated with intelligence tests.

The district follows the PI 11.35 eligibility criteria with professional judgment applied when appropriate. The school psychologists typically have the greatest influence on the determination of intellectual potential of the student. They often report on subtest scores which fall in the average range and discuss their relevance to the determination. Sometimes, members of the M-team will add subjective judgments using information on adaptive behavior level, academic achievement, teacher observations and judgments and test comparisons. Nonverbal intelligence tests are used when language deficits are considered to be a factor in the determination of intellectual potential.

Criteria in Wisconsin Administrative Code. Chapter P1 (11) (P1 11.35 eligibility criteria (2) 9f).

Plus or minus one standard deviation on a single score test or 90 in performance or verbal on a multiple score test. If test results are in doubt, past records/performance shall be considered.

Criteria in Wisconsin Administrative Code. DPI

The district utilizes any score on a multiple score instrument that falls within the average range. We also apply the standard error of measurement at the 95% level of confidence to estimate the potential for average ability.

The potential for average intellectual functioning is documented by full scale score of average verbal/performance split which indicates average functioning, or subtest score clusters which indicate the potential for average functioning.

The criteria is identical to that stated in Wis. Adm. Code PI 11.35. See the 2.) Intellectual functioning" section of the LD Eligibility criteria form included with each M-team report.

Most often established by performance on a recognized and established comprehensive measure of intelligence consistent with PI 11.35 (2) (f) 2.b with provisions for other supportive data if the test results are not considered as reflective of a particular students abilities.

Average sub-test score (s) on intellectual assessment. Variability of sub-test scores indicating within child deficits.

A Multi-Scale intelligence test is generally used. Support for determining potential for average functioning also comes from subtests (with high loading of g), other single score intelligence tests and achievement levels or classroom functioning. Intellectual functioning criteria would be scores that would fall in the average range which plus or minus one standard deviation above or below the mean (85 to 115). We will also use potential for average abilities on the WISC-III subtest scores to indicate potential.

The M-team looks at the child's previous experience, past performance and other data that provide documentation that the child is intellectually functioning in the average range. We also consider that a child whose full scale, verbal or performance IQ scores may not be exactly 90, but their range of scores at some point is 90, (for example, a child's full scale score may be 86, but their range of scores is 82-91) has the potential for average functioning.

Assessment of intelligence is a clinical judgment made using formal and informal tests, direct observation, indirect observation and review of historical data.

We follow state guidelines.

Using the WISC: The cutoff score for establishing average ability should be 90 or greater on either the verbal or performance scale. Although there may be times when use of the full scale is inappropriate, there is really nothing that can be changed at this time in using the formula for academic lag.

Using Kaufman Assessment Battery for Children: A score of 85 or greater on the mental processing composite (MPC) will satisfy the criteria of the Learning Disability program. Eighty-five is one standard deviation (15) below the mean.
Using McCarthy Scales of Children's Abilities: A score of 84 or greater on the general cognitive index will satisfy the criteria of the learning Disability program.

Student's measured full scale IQ score falls within the average range (85-115). If full scale score is below 85, child can still demonstrate potential for average functioning by attained 90 or above, on a part intellectual measure (e.g.. verbal performance on WISC III). Performance (non verbal) IQ with adaptive functioning measures are used when language is a documented area of disability. In some instances, a high degree of subtest scatter (i.e. for average intelligence "if fine motor delay; attention deficit or language is a significant factor").

The district follows the guidelines contained in the PI 11.35 (2) (f).

1. Normal or potential for normal intellectual functioning
2. Score above a minus one standard deviation on a single score instrument, or verbal or performance quotient of 90 or above on multiple score instrument.
3. Instrument must be valid and comprehensive measure.
4. If scores do not meet criteria, team may determine normal intellectual functioning by documenting other evidence of average potential and clarifying why test results may not be valid.

What academic areas are used to determine the areas in which there is a severe discrepancy? Is there an established order for examining these? If so, please describe.

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Reading, Spelling, Math, and written language. There is no particular order for examining these areas.

The areas are math, reading, spelling, and written language. In determining a significance in the readiness area, the child's receptive and expressive language and fine motor skills are considered. There is no established order for examining these.

Please refer to school District of [Name Deleted] Board Policy 5500, Page 37. The district uses the broad reading and broad math scores. Learning Disabilities PI 11.35 (2) (f).

No order. Severe discrepancy is determined on the basis of scores in reading, spelling/written language, and math. Scores providing the basis for severe discrepancy judgment may not be global or broad-range scores; there may be subtest scores which are sufficiently depressed to be "severe."

See Attached policy. From special education handbook. PI 11.35 (2) (f).

Reading, Spelling, Written language, and Math, Readiness. There is no established order.

Significant discrepancy in functional achievement in math, reasoning, spelling, or written language. When dealing with readiness areas, we consider the child's receptive and expressive language and fine motor functioning. No established order exists.

Academic areas used to determine severe discrepancy found in PI 11:35 (2) (f) part 2.a. No established order exists for examining these areas.

Usually a broad individual achievement test that is norm referenced is administered in order to determine which areas need to be further evaluated. Areas noted as problematic in the referral are also targeted for in-depth evaluation through curriculum referenced testing as well as observations and teacher interviews.

No standard order, depends on reason for referral. Reading decoding, reading comprehension, written language include spelling, grammar, punctuation, and capitalization, math computation, math applications.

Readiness or basic skill areas of math, reading, spelling, and written language. Receptive and expressive language and fine motor functioning are also considered in the readiness. No established order.

Reading, math, written language, and spelling. No established order for evaluation.

Two or more discrepancies in the areas of Reading, Written Language, Math or Spelling. Math alone accompanied by less significant discrepancies in other areas.

Reading, mathematics, written language and spelling are areas considered for school aged students. Receptive and expressive language as well as fine motor functioning are used for pre-school students.

Reading, writing, spelling, mathematical reasoning or calculation. Receptive and expressive language and fine motor functioning. The order for examining these depends on the referral.

Math computation, math reasoning, reading, spelling, written language. No established order.

See Attached: 1. Reading, spelling, written language, math. 2. Subtest scores in the above areas including reading recognition, basic reading skills, reading comprehension, math reasoning and calculation. 3. Receptive language expressive language, fine motor skills, readiness for children with less than 2 years of schooling. 4. Listening comprehension. 5. Discrepancy between oral and written communication.

The district considers the areas of reading, spelling, written language, math and readiness areas as indicated by the referral question. No established order is adhered to except that referral guides the initial efforts at evaluation.

Reading, Written language, spelling, and mathematics.

Children entering kindergarten or first grade- Receptive language, expressive language and fine motor functioning. Other students - reading, spelling, written language, math, mathematical reasoning and calculation. All of those areas are considered for every student evaluated.

Basic skill areas of math, reading, spelling, oral language or listening comprehension and written language appropriate readiness areas for basic skill areas (receptive language, expressive language and fine motor skills.

Two or more in the areas of reading, written language, math spelling. Math alone one area alone subtest/test scores in another area marginal and/or classroom performance is below what tests indicate.

Areas used. Reading, Written Language, Spelling, Math. There is no established order for examining these. Significant delays in two out of four areas or math by itself.

Reading, Math, and written language. Generally most students are referred for reading difficulties so we often first look at the discrepancy between the students) expected and present levels of achievement in area of reading.

Math (computation and reasoning), reading (Word analysis and comprehension), spelling, written and oral expression. There is no established order for examining these areas.

We follow state guidelines and examine reading, writing, spelling, math calculation and math reasoning as needed. There is no established order.

Reading, spelling, written expression, math (Computation and reasoning). No order for examining these areas.

When first identified; demonstrates a significant discrepancy in functional achievement in 2 or more of the readiness or basic skills areas of math, reading, spelling, and written language. OR, a significant discrepancy in the single area of math , accompanied by less significance, but demonstrable discrepancies in other basic academic areas. For kindergarten or first grade: If achieving in readiness areas 1 or more years below expected achievement levels for their chronological age. (Readiness areas are in basic skills and/or receptive/expressive. Language and fine motor skills. If delays are in readiness for basic skills, there must be 2 or more areas with severe discrepancy).

The district follows the guidelines contained in PI 11:35 (2) (f).

Two or more of the readiness or basic skill areas of math, reading, spelling, and written language. Math alone, accompanied by less significant, yet demonstrable discrepancies in other basic skill areas. To determine significant discrepancy in readiness areas, M-team shall consider receptive/expressive language and fine motor functioning.

Please describe the process by which the need for special education is determined.

The need for special education is determined as part of the combined judgment of the M-team. Documentation of a disability; combined with documented lack of success of previous interventions contributes to the decisions.

The need is determined by the collective judgment of the MDT members taking into account the success or failure of intervention attempted through regular education.

Please refer to school District of [Name Deleted] Board Policy 5500, page 7. In addition, documentation of failing grades in regular education is a primary indicator of the need for special education services in the district. Using PI procedure.

If a child meets the severe discrepancy criteria as derived via the Bond-Tinker formula, it is probable that the child will need remedial instruction outside the range of instruction and materials generally provided in group, regular education instruction. Additionally, if a child demonstrates perceptual weaknesses which appear to be the basis for academic skill lags, it is probable that individualized instruction, over and above that needed by non-handicapped students, will be beyond that ordinarily possible in a regular size class with a regular curriculum. In the case of older students, where compensation needs may exceed remedial needs, the taped texts, provision for tests read aloud with the student's verbal answers.

Special education is determined by whether there is severe discrepancy between achievement and ability which is not correctable without special education and related services.

The child's needs cannot be met in the regular education classroom, that is their severe discrepancy between achievement and ability is not correctable even with supplementary aids and services in regular education.

After M-team determining eligibility, based on the findings, it is determined whether the severe discrepancy between achievement and ability are correctable without special education and related services and we also consider the effects of environmental, cultural, or economic disadvantage.

At the M-team meeting after has been a determination of eligibility for a handicapping condition, the next section or question asks the M-team to determine yes or no if the student requires specially designed instruction and to state the reasons for recommendation.

Determination of a special education need is based on whether there is a severe discrepancy between achievement and ability which is not correctable without special education and related services. Effects of environment, cultural or economic disadvantage are also considered. Severe discrepancy is determined by Bond-Tinker formula although district policy outlines exceptions to this.

1. What modifications have been made in general education classroom?
2. Have alternative programs been tried? i.e.: Title 1 math, remedial reading.
3. Has the TAI team made suggestions?
4. Does child qualify or nearly qualify for LD?
5. Is child failing or nearly failing any classes?

If the child is found to have a handicapping condition, the M-team then considers the effects of the handicapping condition on the child's performance in regular education and whether the child needs special education as a result of the handicapping condition. The nature and severity of the handicapping condition and also the use of supplementary aids and services in the regular education environment are all considered.

Discussion by M-team determines that student has or does not have needs beyond what can be met by regular education.

Functioning of student in reg. ed.- effect of intervention attempts.

We apply the PI 11.35 criteria and use group consensus to make that determination.

School psychologist reviews records consults with teachers and other educators knowledgeable about the child, parents, does classroom observations, gives IQ and achievement tests, LD teacher also does record review, teacher and parent consultations, formal observation and achievement testing. An M-team meeting is held with parents/advocates and other appropriate professionals to review evaluation results and determine child eligibility for LD based on PI 11.35 (2) (f) or other educational programming. As appropriate reports to the M-team will be required by other professionals as well as the classroom teacher.

If the handicapping condition inhibits the student's ability to learn in he regular education or modified setting. The ability to learn has to be significantly impacted by the handicapping condition. Exclusionary factors are addressed.

See Attached: LD Eligibility criteria study [Name Deleted] School District
If the student is determined to have disability/handicapping condition, the M-team considers the following in relation to the disability:
1. Does the disability adversely affect his learning in regular education?
2. What interventions have been attempted and to what extend have they been successful in assisting the student in regular education?
3. What interventions can be provided in the regular education setting as an alternative to special education?
4. Does the student need to be removed from regular education in order to be successful in school?

After the determination of the disability and handicapping condition, the M-team members are directly asked if a need for special education exists in relationship to the established handicapping condition. Those responses are critically examined and supporting data is presented and considered. LRE type questions are routinely asked relative to the consequences of the student receiving or not receiving special education services.

If a child has average or the potential for average intellectual functioning coupled with significant academic deficits in one or two academic areas and possibly possessing deficits in the child's learning system.

After the M-team determines that the student has a handicapping condition, they discuss the student performance in school as it relates to the disability. If the m-team determines that performance has been affected by the disability and modifications or assistance may be necessary, the student is determined to have on EEN.

M-team evaluation determines eligibility criteria and if so then determines the need for special education and any related services. This is usually accomplished by taking a look at the overall needs including specialized instruction, modifications and structure in terms of the regular school setting with available programs, resources, etc. and determining whether or not these would be able to meet the students needs and if not then specially designed or special LD instruction is considered.

Functioning of student in regular class, prior modifications have not been successful, classroom performance is affecting behaviors, lack of progress in regular classroom.

If the student can get his/her needs met with supplemental aides and services and he/she is being successful in the regular education setting then generally. Special education services are not recommended. However, if this is not the case, and the child is in need of more structure, alternative grouping, alternative or modified materials etc., then he/she is recommended for special education programming. The M-team must first establish if the student displays average intellectual functioning levels (85-115).

The M-team determines whether there is a need for special education after the team has established the eligibility for special education. We first look at he previous interventions that have been attempted and evaluate their effectiveness and whether or not they are sufficient to provide the student with the necessary modifications and instructions to achieve educational success. If the interventions have not been successful or provided a student with sufficient accommodations we then look at the areas based on evaluation data eligibility that the student has a need for special education in. it is then these areas of need that establish the areas of the students functioning the IEP committee will address.

This decision is a collective clinical judgment made by M-team members. it is made by examine information about what has already been tried and analyzing why previous efforts have not been successful.

This determination is made at the M-team. If the student meets the eligibility criteria for an EEN, then the team discusses whether the student needs special education to benefit from the educational program.

PI 11.

Lack of progress in general ed. classes even with modifications. Other remedial services have not been successful. Maybe interfering with self-esteem and/or peer relationships. Poor grades; parental concern; unable to meet needs the general ed. environment.

1. The M-team discusses the findings of each of the members.

2. Based on its findings, the M-team determined if the child has a handicapping condition using the criteria in PI 11.35
3. If the child has a handicapping condition, the M-team determines whether as a result of the handicapping condition the child needs special education.

There is no process or procedure. The M-team has a responsibility of determining for each case whether or not the student needs special education due to the handicapping condition. The M-team report requires a statement of documentation of this need.

Please indicate the tests that are available in the district for determining the level of intellectual functioning of students referred for LD evaluations:

Differential Abilities Scale,
Wechsler Intelligence Scale for Children III
Wechsler Preschool and Primary Scale of Intelligence Revised
Wechsler Adult Intelligence Scale- Revised
Test of Non-Verbal Intelligence
Stanford Binet
Kaufman-Assessment Battery for Children

WPPSI-R
WISC-III
WAIS-R
SBFE
K-ABC
WJPEB - Test of Cognitive Abilities
Matrix Analogies Test (supplemental non-verbal)

Please refer to the attached list. Tests are highlighted in Yellow. (Not included in the materials sent to us).

All age-appropriate Wechsler Scales, and this is usually the ability test of choice by the school psychologist. Additionally, Stanford-Binet, Kaufman, and Woodcock-Johnson Cognitive ability tests are available and sometimes used.

WISC-R/III
WPPSI - R
Stanford Binet 4th Ed.
WAIS - R
Woodcock-Johnson Cognitive Ability

Stanford Binet Intelligence Scale 4th Ed.

Wechsler Intelligence Scale for Children III
Kaufman-Assessment Battery for Children

Stanford Binet Intelligence Scale 4th Ed.
WISC-R/III
WAIS
Kaufman

Wechsler Intelligence Scale for Children III
Woodcock - Johnson Cognitive Ability
Kaufman-Assessment Battery for Children - Mental processing portion
Wechsler Adult Intelligence Scale-Revised
Woodcock - Johnson Cognitive Ability Test - Spanish edition
Slosson Intelligence Test - Revised
Battelle Development Inventory - cognitive portion
Ravens Coloured Progressive Matrices

WISC-R/III
WPPSI-R
WAIS-R
K-ABC
TONI-2
Leiter

WPPSI-R
WISC-III
Stanford Binet Form LM
Test of Nonverbal Intelligence (TONI)
McCarthy Scales for Young Children
WAIS - R

WPPSI - R
WISC - III
WAIS - R
K-ABC
K - BIT
TONI - 2
WJ- R Psycho. Battery - Test of Cog. Ability

WPPSI - R
WISC - III
WAIS - R
K-ABC

Slosson
Leiter

Wechsler Preschool and Primary Scale of Intelligence-Revised
Wechsler Intelligence Scale for Children-Third ed.
Wechsler Adult Intelligence Scale-Revised
Kaufman Assessment Battery for Children
Stanford-Binet Intelligence Scale- 4th Edition
Detroit Tests of Learning Aptitude.

WISC - III
WAIS - R
Stanford - Binet
Test of Non-verbal Intelligence
French Pictorial
Kaufman Assessment Battery for Children
Hight
WPPSI

WPPSI - R
WISC - III
WAIS - R
K-ABC
Stanford Binet
Wechsler Scales
McCarthy Scales

Stanford Binet Intelligence Scale 4th Ed.
Wechsler Intelligence Scale for Children III
McCarthy Scales of Children's Abilities
Wechsler Individual Achievement Test
Test of Nonverbal Intelligence - (TONI-2)
Leiter International Performance Scale
Kaufman Brief Intelligence Scale

See Attached:
WISC - R
WPPSI - R
WISC - III
K-ABC
McCarthy
Stanford Binet IV
Also standard scores from subtests of any of the above as well as standard scores of other norm-referenced tests administered as pert of the assessment.

WPPSI - R
WISC - III
WAIS - R
K-ABC
Stanford Binet IV
S- FAIT
K - BIT
McCarthy Scales

Wechsler Preschool and Primary Scale of Intelligence-Revised
Wechsler Intelligence Scale for Children-Third ed.
Wechsler Adult Intelligence Scale-Revised
Stanford-Binet Intelligence Scale-4th Edition/LM
Kaufman Assessment Battery for Children
Bayley Scales
TONI

Cognitive levels test
Kaufman Brief Intelligence Test
Slosson Intelligence Test
Stanford-Binet Intelligence Scale-Revised
Wechsler Adult Intelligence Scale-Revised
Wechsler Intelligence Scale for Children
Wechsler Preschool and Primary Scale of Intelligence

WISC-III
WJ
KBIT
TONI-2
DAS
WPPSI-R
WAIS-R
Stanford-Binet

CTONI
Leiter
Battelle
Slosson

K - BIT
WISC - R
WPPSI
WISC - III
K-ABC
WAIS
TONI

WISC-III
WAIS-R
WPPSI-R
Stanford Binet Intelligence Scale 4th Ed.
Test of Nonverbal Intelligence
Kaufman Brief Intelligence Test

Stanford Binet Intelligence Scale 4th Ed.
Wechsler Intelligence Scale for Children III (WISC-III)
Wechsler Preschool and Primary Scale of Intelligence Revised (WPPSI- R)
Wechsler Adult Intelligence Scale- Revised (WAIS -R)
McCarthy Scales of Children's Abilities
Kaufman Assessment Battery for Children

WISC - III
Stanford-Binet IV
Columbia
Woodcock-Johnson
WAIS - R
Informal Piagetian Assessment
Bayley
McCarthy
WPPSI - R

Wechsler Tests
K-ABC
Stanford-Binet IV

WISC - III
Stanford - Binet

Kaufman Assessment Battery for Children
Differential Ability Scale (DAS)

WISC - III
WPPSI-R
KABC
K-BIT
McCarthy
Stanford-Binet 4th Edition
WAIS-R
Vineland (classroom, Survey and full length interview forms)

WISC - R
Stanford Binet (29)

WISC - III
Stanford - Binet
Kaufman Assessment Battery for Children
Wechsler Preschool and Primary Scale of Intelligence Revised

Please indicate the tests that are available in the district for determining the level of achievement of students referred for LD evaluations.

Woodcock Johnson Tests of Achievement-Revised
Woodcock Reading Mastery
Test of Written Spelling
Key Math
Gray Oral Reading Test
Wechsler Individual Achievement Test

Woodcock Reading Mastery
Test of Written Spelling
Key Math Test
PIAT
Test of Written Language
WIAT
Ekwall Reading Inventory
Woodcock Reading Mastery Tests Revised- Form G,H
Key Math -Revised- Form A, B
Kaufman Test of Educational Achievement- Comprehensive Form
Written Expression Test
Test of Written Spelling - 2

Attention Deficit Disorders Evaluation Scale (School Version)
Attention Deficit Disorders Evaluation Scale (Home Version)
Learning Disability Evaluation Scale
Woodcock-Johnson PsychoEducational Battery- Achievement Test
Test of Kindergarten/First Grade Readiness Skills
Brigance Diagnostic Inventory of Basic Skills (Blue)
Brigance Diagnostic Inventory of Early Development (Birth to Seven Years)
Kaufman Test of Educational Achievement- Brief form
Behavior Evaluation Scale
Wechsler Individual Achievement Test
Math Comp Curriculum - Based Assessment

Please refer to attached list. Tests are highlighted in Pink. (Not included in materials sent to us).

The Woodcock-Johnson of academic achievement are most generally used. The Kaufman Achievement Test, in standard or brief form, may be used. Other, more specific tests are sometimes used--- Test of Written Language, Key Math Diagnostic Arithmetic Test, Test of Written Spelling, School psychologist generally screens academic skills with the Wechsler Individual Achievement Test or the Wide Range Achievement Test.

Woodcock-Johnson
TWS
TOWL
KTEA
Stanford Diagnostic Reading
Stanford Diagnostic Math
Brigance
Key Math
TEWL
TERA
TORC

Woodcock-Johnson PsychoEducational Battery-Achievement Test-Revised
Kaufman Test of Educational Achievement
Test of Early Reading (TERA)
Test of Early Math Ability (TEMA)
Peabody Individual Achievement Test Revised
Diagnostic Screening Test : Math :Reading
Brigance
Wechsler Individual Achievement Test

Woodcock-Johnson PsychoEducational Battery- Achievement Test -Revised

TERA-2
TEMA-2
TEWL
WRAT
Key Math
PPVT-R
VMI
Gray-Oral Reading Test
TWS-2
Curriculum based assessment
TOLD-2

Woodcock-Johnson Achievement Test
Kaufman Test of Educational Achievement
Woodcock Reading Mastery Tests Revised
Key Math -Revised
Slosson Oral Reading Test
Test of Written Spelling
Boder Test of Reading-Spelling Patterns
Brigance Inventory

Woodcock Reading Mastery-Revised
Key Math-Revised
Woodcock-Johnson Tests of Achievement-Revised
Test of Reading Comprehension (TORC)
Test of Early Reading Achievement
Test of Written Language II (TOWL)
Silvaroli Classroom Reading Inventory
Kottenmeyer Spelling Inventory
Wide Range Achievement Test-Revised
Brigance Inventory of Basic Skills
Brigance Inventory of Early Development
Brigance Inventory of Essential Skills

Test of Early Math Abilities
Test of Early Reading Abilities
Test of Early Written Language
K-TEA Comprehensive Form
Woodcock-Johnson Achievement Test
PIAT-R
Key Math
Woodcock Reading Mastery Tests
Test of Written Spelling

Test of Written Language
Stanford Diagnostic Reading

K-TEA
WIAT
WJ-R Psycho. Battery-Test of Achievement
LAP
K-SEALS
Woodcock Reading Mastery Tests -R
TERA
TEMA
Key Math -R
TWS-3
TOWL
DSPT
TORC (11)

Woodcock-Johnson PsychoEducational Battery
PIAT-R
Woodcock Reading Mastery Tests
Key Math -R
TOLD
VMI
PPVT

Woodcock-Johnson PsychoEducational Battery (Achievement Tests)
Peabody Individual Achievement Test-Revised
Woodcock Reading Mastery Tests-Revised
Key Math
Test of Early Reading Ability
Test of Written Language-2
Test of Early Written Language
Test of Reading Comprehension
Kaufman Test of Educational Achievement
Wide Range AchievementTest
Brigance Inventory of Basic Skills
The Boder Test of Reading Spelling Patterns

Woodcock-Johnson
Test of Written Spelling
Test of written Language
Test of Adolescent Language
Key Math

H26

Weschler Individual Achievement Test
Brigance
Kaufman Achievement
BASIS
WRAT-III
Peabody Individual Achievement Test

Woodcock Reading Mastery Tests
Woodcock-Johnson PsychoEducational Battery- Revised
PIAT-R
PPVT- Revised
K-ABC
TERA
TEMA
TOWL
TOWE

Kaufman Test of Educational Achievement- Brief form
Kaufman Test of Educational Achievement- Comprehensive form
Woodcock-Johnson PsychoEducational Battery for Children- Revised
Wechsler Individual Achievement Test Screener
Wide Range Achievement Test
Test of Written Language
Brigance

WIAT
WJ-R
WRMT
Key Math
KTEA
TOWL
TOWE
TOWS
TOWS-R
TOWS-III
TEMA
Bracken
Boehm
VMI
NEAT
WRAT-R
WRAT-3
TERA

Goodenough Harris
VADS
TKFGRS
CELF-R
LET-II
ROWPVT
EOWPVT
OLSI
PPVT
TOPS
TOLD
TARO
ALL
LPT
TONI-2
ADT-W
MVPT
TAD
PDP
DP
PLT-3
LAPD
APP-R
EW-R
ASSET
SPEL-2

WJ-R
Key Math-R
PIAT-R
WIAT
Brigance
Woodcock Reading
K-TEA
WRAT-R
VMI
TOWL
TOLD
TONI

Woodcock-Johnson Tests of Achievement-Revised
Wide Range Achievement Test-Third Edition
Kaufman Batteries

Peabody Picture Vocabulary
Key Math
Woodcock Reading
K-Seals
Wechsler Individual Achievement Test

See all of the instruments listed on the form attached to the "Consent for Evaluation" in each packet. (This was not included with survey).

W-J
KTEA
PIAT-R
Key Math
Woodcock Reading Mastery
Dolch word lists
Informal writing tests, WIAT
Norris Educational Achievement Test
WRAT-3
DAS-Achievement
Boder Test

WJ-R
WRM-R
TOWL-2
TWS-3
TERA
TEMA
Key-Math -R
DTLA-2
TEWL

Woodcock-Johnson Achievement Battery
Wide Range Achievement Test
Gray Oral Reading Test
Wechsler Individual Achievement Test
Key Math
Woodcock-Johnson Test of Reading Comprehension (23)

Woodcock-Johnson PsychoEducational Battery- Revised
Bracken Basic Concept Scale-Revised
Kaufman Test of Educational Achievement
Wechsler Individual Achievement Test
Test of Early Reading Abilities

Test of Early Math Abilities
Test of Early Written Language
Test of Reading Comprehension - Third Edition
Wide Range Achievement Test-Revised
Brigance Inventory of Basic Skills
Curriculum Based Assessment Procedures
Basic Skills Inventory Diagnostic

PIAT-R
WRAT-R
WIAT
Woodcock Reading Mastery
BASIS
ARI
Silveroli
TERA-2
TEMA
TOWS-2
TORC
TAP
Key Math
Woodcock-Johnson
TOWL
Brigance
TOLD
Ann Arbor

Woodcock-Johnson-R
WIAT
TOWL
TERA
Curriculum Based Measures
Informal tests

W-J Psycho Educational Battery
W-J Reading Mastery
Key Math
Spache Diagnostic Scales

K-ABC (Achievement Subtests)
K-TEA
Norris Educational Achievement Test (NEAT)
WRAT-R-TEWL

TEMA-2
TOWL-2
TWS-2
WIAT
Woodcock-Johnson-R
Woodcock Reading-R
Boder
Battelle
Checklists (e.g. Albert, Walters, Vincent)
Brigance
Key Math-R

Woodcock-Johnson - Revised
Wechsler Individual Achievement Test (WIAT)

Woodcock-Johnson - Revised
Peabody Individual Achievement Test- Revised
Wechsler Individual Achievement Test
Kaufman Test of Educational Achievement
Test of Kindergarten/First Grade Readiness Skills
Gray Oral Reading Test-3
Brigance Inventory of Basic Skills
Wide Range Achievement Test -Revised
Key Math

Composition of building assistance teams or student support teams

School Psychologist- principal- EEN teachers- Regular Ed. teachers- Counselor- Chapter I teacher. In both buildings.

Elementary School- Psychologist, Guidance counselor, LD teacher, School Nurse, Reading Specialist (94-95)
Middle school- Grade level Teams
High School- Principal, Guidance Counselor, 2 ED Teachers, LD Teacher, Social Services, AODA Counselor, Classroom Teachers, School Nurse, Chapter I, JPTA.

Elementary, Middle school, High school: Regular education teachers (with the exception of high school), Special Education Teachers (with the exception of high school), Guidance Counselor, School psychologists, and /or social workers, Building Administration, Students (middle school only), Reading specialist/Title I (elementary only).

Varies- usually includes regular and special education teachers, other membership varies.

Counselor, psychologist, LD teachers, Chapter I teacher, Speech and language clinician, School nurse upon request and classroom teacher.

The answer was NO.

The answer was NO.

The answer was NO. District is small enough that much pre-referral consultation goes on informally.

Principal, Guidance Counselor, School Psychologist, Reading Specialist, Referring teacher, teacher of referred student from past year, any special teacher that the coordinator designates.

Elementary/Middle school: MS teacher, 3 elementary teachers- Consultation when appropriate with psychologist, reading specialist, Title I teacher, or special ed. teachers.

At the elementary level: It is usually School Psychologist, Classroom teacher, EEN Teacher, Often, the Reading specialist/Chapter I coordinator are also involved. At the middle school and high school levels: In addition to these people, the guidance Counselor is also involved.

Middle school: Psychologist, EEN Staff (LD, ED, CD), AODS, Principal, Regular ed. teacher
High school: Psychologist, Counselor, Principal, AODA, Regular education teacher.

Elementary: Counselor, Teachers, Support staff (e.g. Psych, social worker), Principal
Middle School: Same with the exception of principal
High School: Same with the exception of principal.

Chaired by Guidance Counselors. Also includes psychologists, administrators, classroom teachers, selected EEN staff as appropriate. Same at all levels.

Elementary: Principal reviews every pre-referral to assure that prior intervention have been attempted.
Middle School: Pupil services, EEN Director, Principal, Psychologist (as appropriate), Guidance Counselor, EEN teachers, Regular Ed team reps. as appropriate.
High School: DPS/EEN, Assistant Principal, EEN Teachers (As appropriate), Guidance Counselor, Psychologist, [Name Deleted] Title I A I.

Elementary: Counselor, LD teacher, Regular ED teacher, Principal
Middle School: LD Teacher, Classroom teachers
High School: LD teacher, ALT Ed Teacher, Counselor, School Psychologist, Principal,

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Social Worker, and (police Liaison Officer).

Guidance counselor, regular education teacher, principal are core team members. Others are called in as needed (reading specialist, Title I, EEN teacher, Psychologist, Social worker, other teachers, others as needed), grade level teachers meet daily with EEN teacher at middle school.

The answer was NO. Currently in training and development.

School Psychologists, School Workers, Program Support Teachers, Director of Student Services, Building Principal, Chapter One, General Education Teacher, At Risk Teacher [Name Deleted], and Guidance.

The composition of the teams will vary based on the needs of the child to be discussed. For a potential LD referral the team would include regular classroom teachers, LD teacher, Reading specialist and/or math teacher, Principal, Psychologist. This would hold true both at the elementary and Junior high school level as well as high school.

No Response

The answer was NO.

Elementary Level Only: Guidance Counselor, School Psychologist, School Social Worker, Teachers and other specialists on a case by case basis.

The answer was NO.

Student Services Coordinating Committee at all levels consist of Principal, Counselors, Reading Specialist, Nurse, School Psychologist, Gifted and Talented Coordinator and members of other agencies. Classroom teachers are invited when needed.

Principal/Counselor, School Psychologist, Teachers.

Elementary: Teacher, Psychologist, Parent, Reading specialist, Guidance counselor and social worker.
Middle and high School: Teacher or family leader, Guidance, Psychologist, social worker.

Elementary: Principal, Psych, S. Worker, SLP, Guidance Counselor, LD, ED, CD teachers, Special ED. or Director of student Services and District nurse as needed.
Middle School: Principal, Asst. Principal, Psych, S. Worker, Guidance Counselor, Diagnostician Also, LD, ED, CD, SLP, Nurse, Director and Asst.. Director of Special ED., Police Liaison Soc. Services worker as need basis.
High School: Principal, Asst. Principal, Psych, S. W., Guidance Counselor, Police Liaison,

Director/Asst. Director of Special Ed., LD, ED, CD, Nurse, SLP, as needed basis.

The answer was NO.

Principal, Counselor, School Psychologist, Classroom Teacher brings concern about student to team, others included as appropriate (EEN, Chapter I).

Please describe the type of training that has been provided to team members.

The concept of student support teams was introduced to the staff by the school psychologist and building principals.

Decisions- Building Assistance teams, Collaborative team building, ADHD trainer of trainers, [Name Deleted] Middle School team conference.

College course work, Out of district conferences, In district in service.

Training varies but includes in-service, consultants, conference attendance. Training is geared to the individual building.

Each team member is a college graduate specializing in their educational area. In service training has been conducted each year to familiarize staff with their role and the process.

The answer was NO.

The answer was NO.

The answer was NO.

Coordinator (School Psychologist) had three-day training in TAT from [Name Deleted] from University of Arizona, two-day training in collaboration in the schools -- training in teacher consultation. No training to team as a unit.

One day workshop presented by a local school that had a IAT team in place. IAT members are encourage to attend workshops.

Training has included our own district in-service/meetings

In service regarding characteristics of various disabilities and At-Risk students. Student Assistant Program and Support Group Training.

Two day workshop presented by [Name Deleted]- Elementary counselor and 10 elementary teachers.

No formal training provided. Procedures are well-established as are individual roles.

No formal training.

At the elementary level training was given by the school psychologist. Training included how to make modifications to regular education instruction, behavior modification assessment techniques. No training was given at the middle school or high school levels.

Group functioning and collaboration.

The answer was NO.

Continued opportunities to attend workshops in many areas including but not limited to angry child, positive behavior, intervention, etc.

The staff has received training in effective teaching strategies, and learning styles. Various staff members have been trained and share their expertise in all aspects of the LD child.

No Response

The answer was NO.

In-service training was received by guidance counselor and school psychologist through [Name Deleted].

The answer was NO.

Training has been informal. The committees are relatively recent addition.

Teacher Assistance Team Training has been offered to all elementary schools.

Three day in-service training with follow-up monitoring for 1 year.

Training in M-Team procedures has been offered to EEN teachers & pupil services staff at the beginning of each school year during teacher work days. Staff members attended themselves or received documentation from a building representative who attended.

The answer was NO.

No training provided beyond each individuals degree/license and personal professional development.

Please describe the nature of the collaboration or inclusion (for example, team teaching, pre-referral activities, collaboration with individual students).

> Collaborative planning and team teaching is done between regular and special education students. Support to the regular class is provided by either EEN teachers or EEN instructional aides. Joint parent conferences are held between regular and special educ. teachers. Pre-referral consultation and planning exists between regular and special education teachers. Only at elementary level.
>
> Team teaching, pre-referral activities, classroom amplification. The nature of the collaboration is inclusion, mainstreaming team teaching, resource help, assignment modification, reading tests aloud, tests taken in resource room alternative assignments, PASS committee, extended time for task, conferencing, contracting program aides, augmentative technology. At all levels.
>
> Pre-referral activities, team-teaching, consultation, student release/dismissal from regular education classes for additional assistance. At all levels.
>
> There is a wide range of collaboration taking place across grade levels and disability areas. Related services of OT/PT are collaborating with regular and special education teachers to develop integrated goals that are implemented across the curriculum. Special education teachers devote a portion of their teaching assignment to meeting problem solving and developing integrated activities for students for students in their school on behalf of students identified with EEN. Regular team meetings take place in some schools and Teacher Assistive Teams are operating in the majority of schools in our district.
>
> Student-teacher collaboration, team teaching, pre-referral process, teacher consultation, teacher assistance teams, IEP meetings, regular-special education meetings. At all levels.
>
> Team teaching, Monitoring reports- every two weeks, Individual teacher surveys- each semester, Participation in IEP's. At all levels.
>
> The answer was NO.
>
> Collaboration consists of providing pre-referral assistance or strategies informally, special ed. teacher assistance in modifying regular ed. curriculum or methods for special ed. students in mainstream, special ed. teachers monitor student progress in reg. ed. areas and often provide assistance in work production or strategies to help student succeed in reg. ed., special ed. teachers advise and assist in determining grading of special ed. students. At all levels.

Team teaching in middle and high school particularly in reading, social studies areas. Child Study Team in each building. Regular Coop times are set up by grade level in elementary (monthly) so that teachers can problem solve. Middle school teachers are block scheduled so problem solving meetings are possible. Regular contact between case manager and regular education teacher through verbal consultation and written monitoring sheets.

Team teaching, regular consultation between spec. ed. and reg. ed. teachers, modification to reg. ed. curriculum, alternative tests or presentation of test, alternative grading policy, pre-referral consultation with Psychologist and LD teachers, inclusion of LD students in. general educ. classes, Spec. Ed. aides in LD program and general ed., class LD materials and technological aides, loaned to general ed. teachers, peer tutoring, cooperative learning, text books on tape. At all levels.

When EEN students are included in the regular education classrooms, EEN staff (teacher or aide) usually provide direct assistance in the classroom in the areas of assignments, note-taking, etc. Team teaching also occurs between EEN and reg. ed. teachers. There is joint planning for lessons and also for modification of assignments, tests, etc. At all levels.

Pre-referral discussions between regular ed. and EEN teachers regarding student's needs prior to referrals. Collaboration between regular and EEN staff regarding individual students. Building assistance team discussions at Middle and High school levels.

Pre-referral activities (e. g. Modifications, Informational Testing)
Collaboration re: Individual students
Ex. Ed. Aides working with all students including mainstreamed Ex. Ed. students in the regular class.

Discussion used to generate solutions to identified problems. Referrals are made for further evaluation. individuals provide direct services as a result of these efforts.

Cooperative learning, team teaching, Pre-referral activities, EEN teachers are full members core team. Only at Middle school level.

Team teaching, child study teams, Pre-referral activities, collaboration with students. At all levels.

Team teaching, observation and collaboration, peer coaching, content mastery, complimentary instruction, intervention teams, 504 team, co- teaching, collaboratively taught classes across EEN disability areas, grade level meetings with EEN teacher as team member. At all levels.

Elementary: Services are primarily resource based with the majority of students receiving

the majority of their education in the general ed. classroom. Collaboration efforts include team-teaching, sharing students with Title I, and joint planning for integration activities.
Middle school: unit is primarily inclusion based with a self-contained option.
Team-teaching is practiced by 3 of the 4 LD teachers. The "house concept" of the middle school promoted a full exploration of pre-referral interventions and collaboration.
High school: utilizes the full continuum of services, as well as advocating, team-teaching, and teacher support in the general ed. classroom.

All children with disabilities are based in their home school general education classroom as a rule of thumb. The percentage of the time they are educated in those classrooms, small group environments, and community depends on their IEP. The type of Collaboration depends specifically on the make up of the teachers IEP caseload as well as teacher personality variables. The range of cooperation includes consult team teaching, collaboration with lesson plans, individual support in general education.

-Consultation with special ed. staff
-Extensive collaborative teaching with sp. ed. staff and reg. ed. staff
-Sp. Ed. teachers serve on student service teams
-Sp. Ed. teachers provide mini. training session for the reg. ed. staff.

Elementary: Team teaching, pre-referral consultation and activities, joint planning and intervention for individuals and small groups, all are on Student Assistance Team which meets weekly, regular education and LD teacher in the same classroom at the same time.
Middle School: 6th grade: One teacher co-teaches with science/social studies/math
One teacher co-teaches with science / social studies/ math written language/reading.
7th grade: Both teachers co-teach geography/science/math written language.
One teacher assists in reading.
8th grade: Both teachers co-teach social studies/ written language/science
One co-teaches math
High School: All LD students at our school are fully included. We have a resource program where assistance is provided individual students in accomplishing assignments studying, reading, or having tests read. LD teachers collaborate with regular education teachers to secure necessary modifications, shorter assignments, modified tests, longer time to take tests, etc.

The answer was NO.

Team teaching is the most widely used form of collaboration. Pre-referral activities are second most widely used- especially at the elementary level.

We implement collaboration between regular and special educators on a regular basis in all three of our schools. This collaboration takes place in the forms of: pre-referral activities, problem identification and solving for both individual students and there classrooms, monitoring of student's progress and carry-over of goals and interventions in regular and special education settings, team teaching, and teacher assistant teams. At all levels.

This varies at the different levels. There is a good deal of team teaching at the elementary level. Support services and collaboration with regular classroom teachers are more prominent at the middle and high school levels.

I could give a very lengthy response to this question. We do all of the examples listed and send teachers to neighborhood schools to maintain students in their general education classes if necessary.

Pre-referral activities, Team teaching, mutual problem solving, sharing students within families.

Pre-referral (BCT's) and follow up activities
Consultation meetings with parents and staff
Integration days are provided for collaboration between reg./sp. ed. staff
Team teaching
EEN Ed. Assistance for students to allow inclusion to greater degree.

[Name Deleted] Employs the "Content Mastery Model" district wide. In this model, most LD students attend regular classrooms for basic academic instructions. Then see the LD teacher for re-teaching, reinforcement, alternatives modes of presentation, test taking, drill, etc. LD teachers consult regularly with classroom teachers and often team teach or engage in other collaborative activities. At all levels.

Team-teaching, pre referral intervention (student support team), collaboration with individual teachers on individual students, collaboration with reading specialist, Chapter I, At Risk, Gifted/Talented staff, IEP's and parent/ teacher conferences, Student assignment sheets/notebooks. At all levels.

Appendix R

M-team Responses to Survey

Responses of M-team members from randomly selected school districts to Research Questions 2 and 4

Research Question 2:

If a student meets the criteria for learning disabilities, how is it determined whether the child needs special education?

Position: Classroom Teacher

It is determined by the M-team as to whether or not the child needs supplemental help or total help from special ed. (If the child qualifies and meets the criteria, then the child receives the help he or she needs.)

A M-team is held with parents and professionals that have interactions with student in an academic learning environment. People who have been involved with testing report their findings plus reactions from the classroom teacher and how he/she sees the child growth in the classroom.

Position: LD Teacher

First the needs are examined to see if they could be met in regular education with only consultation and monitoring by the LD teacher. If needs are more extensive than that model would allow, we look at how to deliver the services. Our options include co-teaching, tutorial support, pull-out. All of the above options are being used with our LD students currently.

1. Average ability
2. 50% below expected achievement (formula)
3. classroom teacher's observations
4. work samples (past and present)
5. outside observations (LD, Psychological, parent, etc.)
6. Past achievement test scores
7. Present individual and group achievement scores
8. Informal tests

The need is determined by collective judgment of the multidisciplinary team members taking into account the success or failure of intervention attempted through regular education.

If the criteria is met, and the M-team determines that a handicapping exist, it recommends to the director to offer placement.

How they are actually functioning in the regular classroom setting and Chapter I classes is considered to determine whether the child actually needs special education.

An M-team consisting of any or all of the following: school psych, LD teacher, parent, classroom teacher, social worker, administrator, student... meets and discusses student's strengths and weaknesses, learning styles, (failing) grades, evidence of effort on the part of the student; teaching style of staff involved, etc. All factors are considered so the best placement is made for the student.

If the modifications that have been done in the regular room-still are not having the student meet with success- then some kind of special ed. intervention is needed.

1. All interventions have been tried in regular setting.
2. Sp. Ed. can meet the child's need by providing more time, individual instruction.

After determining that a child has a handicapping condition an M-team determines whether the child needs special education as a result. To do so, the M-team determines what child's needs are and if those needs can be met in the regular education environment without special education. The M-team consider the regular education services and programs already available within the school building such as Title I., ESL, and G&T. Adaptations such as modifications of teaching strategies, teaching materials, and assignment expectations are considered and a determination is made as to whether regular education can provide the adaptations needed. If regular education can not meet the child's needs that need for special education is documented on the M-team report. Further consideration is also given to related services that may be necessary to meet the student's needs.

Functional achievement relative to expected achievement. If a child qualifies and meets the criteria for a learning disabilities- they also need to show low classroom performance to receive Sp. Ed.. services. if the student is able to make it with average (C's) to above average (A's & B's) they do not qualify. They have been able to compensate, modify or whatever to afford success. Most likely its a conscientious student and parental/support. If the student is also failing courses- he qualifies.

Position: Diagnostic Teacher

In some of the districts in which I work, consideration is given to whether the child's needs can be adequately met within regular education. In other districts, no consideration is given to this question. it is just assumed that meeting the criteria means the child needs special education.

M-team, parents, through review of developmental profile, many observations.

The parents, LD teachers and classroom teachers meet to develop an IEP determining the specific special education needs. Some of the needs will be met in the classroom and some pull-out. Our LD teacher will only assist in the identified area of significant need, even if math is close but doesn't quite make it for assistance.

Position: Counselor

A determination is made as to whether the handicapping criteria are significantly interfering with student's ability to learn within the regular education setting with or without modification.

We have a staffing in which the specialists and school staff are involved. The parents are in attendance also. Short reports are given by the participants, and if the group decides that special education is called for we draw up a proposal which is sent to [Name Deleted]. The powers that are, at [Name Deleted], determine if placement in a special education program is necessary.

Position: School Board Member

Portfolio review (include tests, etc.), staffing, conference with parents/child.

Position: Speech Therapist

Psychologist (on M-team) has a formula (mathematical).

1. -Rule out motivational factors
   -Rule out environmental/ economical factors
   -Rule out ESL, ADD/ADHD
   -504 peass [sic] considered steps
   -Teachers attempt modifications
2. initial staffing held, ideas shared, recommendations developed.
3. Referral
4. Testing
5. M-team- If the LD handicapping condition exists and reasonable attempts to modify in the reg. ed. classroom fail, a child who meets criteria is placed in the LD program. Special Ed. director determines placement based on M-team recommendation.

M-team determines what child's needs are and if those needs can be met in the regular education environment without special education. M-team considers regular education services and programs already available within the school building such as Chapter I, classroom modifications, adaptation of teaching strategies, modification of assignments (read tests, performance expectations). If regular education can not meet the child's needs than need for special education is documented on the M-team report.

Position: Principal

A multi Disciplinary team meets to develop an IEP which is then reviewed by Sp. Ed. supervisors (in our case) [Name Deleted] personnel.

Nature and severity of learning disability-each child is viewed individually based on need and reported evaluation information.

The M-team determines whether there is a need for special education after the team has established the eligibility for special education. We first look at the previous interventions that have been attempted and evaluate their effectiveness and whether or not they are sufficient to provide the student with the necessary modifications and instructions to achieve educational success.

Discussion at M-team.

1. A multi-discipline team meeting is held
2. Input from teacher, parents, administration and student is gained
3. parental consent given

Once the various tests have been administered by the specialists involved, the M-team meets to review and discuss all the findings and make and to make an appropriate recommendation. The M-team report is forwarded to the Director of Special Education. All the information is reviewed with a decision being made by the Director as to whether or not special needs are warranted.

Is disability educationally handicapping?

Does a significant discrepancy exist between their level of functioning and their expected achievement. The discrepancy must exist in the two or more academic areas. The discrepancy is not the result of any other handicapping consideration, lack of motivation, cultural or economic disadvantages, negative attitudes or significance disruption or school experience.

If a student meets the criteria for learning disabilities, the M-team determines what will best meet the child's needs. Each is assessed individually. Inclusion in the reading program in the regular ed. classroom may be determined to be the most appropriate with special education help in identified skill areas, or total pull-out may be the most appropriate for another student in language. Special education programming is provided to students who meet the criteria for LD, however the instruction may be delivered in various forms.

This is determined by the M-team process, and by discussions with teachers, parents, counselors, and others acquainted with the student.

Position: School Psychologist

After finding the child is LD, we look at classroom performance and report card grades to determine if the condition is educationally handicapping. We also look at past interventions and determine if the child's needs can be met in regular education or if they will be best met in special ed.

1. The regular classroom does not meet the students needs even with appropriate modifications.
2. All regular ed. modifications/ alternate programs have been attempted
3. The Sp. Ed. class will meet the students needs.

Is not meeting requirements in academic for the classroom teacher.

If a student meets the criteria, then the M-team determines whether or not special education is needed. We have had some students who were found to be "Learning Disabled", but the M-team members, including the parents, agreed their needs could be met totally in regular education, with perhaps only occasional support (consultation) from LD teacher. I think the more basic question is: how do we truly determine if a student meets criteria in the first place?

The classroom teacher indicates whether the child is benefiting from instruction in the reg. ed. classroom. The M-team members also attempt to evaluate the child's academic progress.

The M-team makes the recommendation for eligibility and the special ed. supervisor reviews and either places the child or disagrees and reconvenes the M-team or speaks to the LD diagnostician for clarification.

The team decides if the student is severe enough to warrant placement.

The nature and severity of learning disability-each child is viewed individually based on need and reported evaluation results.

The M-team considers whether the current levels of intervention (support services and supplementary aids) have been effective and whether they are adequate in meeting the child's needs. Obviously, in most instances they are not sufficient, or an EEN referral would not have been initiated. If the child appears to require more than what can be offered in regular education, then special education services are warranted.

Evidence of significant difficulty with academics in school; usually reflected in low or failure grades. The disability needs to be sufficient severity to be considered handicapping, and require the support of special education to be successful in school.

If the child is unable to perform academically in reg. ed. with modified programs. It is determined that the need for sp. ed.

Like other eligibility issues, determination of need for special education services is subjective. Hypothetically, this means that actual determination of need is unevenly applied between school districts or even among school buildings within the same district. Beyond meeting eligibility criteria, actual determination of need is based on the opinion of the

M-team. This determination usually depends heavily on the extent and types of educational services available within a district building. To state the obvious, if there are scant regular education services, the determination of need is likely to be affirmative. If educational services are more abundant and effectively applied, then determination of need is likely to be tempered. (These observations should surprise no one.) Another factor which affects determination of need is the rigor with which M-teams apply state and federal statutes. Simply stated, some M-teams are more rigorous than others. As case manager, I encourage team members to the use the examples provided by our own DPI in determining need for special education services. I have attached a copy for your reference (ignore the scribbling in the margins). These examples will more directly answer your question of what the M-team considers when addressing the question of need for special education services.

Current performance in the academic class, as well as interventions or modifications that can be or are being provided are taken into consideration. If a student has a learning disability and their needs can not be met in the regular setting even with modification then special education is recommended. If the student has a learning disability but his or her needs are being met in the regular classes special education is not recommended.

The question becomes one of benefits. Will the child benefit from the service provided compared with the type of program that may be created using the information generated through the M-team process. For example, it is not uncommon for a child that is learning disabled to be found eligible for services in mathematics with weaknesses in reading and continue reading instruction in the area of Chapter I. Sometimes for example, students may have been found to be experiencing a learning disability affecting the area of reading, with weaknesses in spelling and language., where the decisions are made based upon the student, school, culture, and service offerings, that it may be best for the child to continue in the Chapter I program, with other resources mastered in the area of spelling and written language. The answer to the question regarding special education is closely linked to who the child is and what services are available for the child onsite which would be less restrictive than an EEN placement.

Several factors are considered:
-What are his/her current grades? If failing, the child is more likely to need special ed. services.
-What support is student receiving from home, teachers, etc. ? How motivated is the student to stay out of Special ed.?

If it is apparent that the accommodations and supports provided by the mainstream setting can not meet the child's needs to an adequate degree, special education is warranted.

We do formally go through the three stages of : 1st, Identifying a disability, 2nd, determining there is a handicapping condition and 3rd, whether there are EEN. I can't think of an recent example when we have said yes to parts and not found EEN. Some students may be found to need monitoring rather than scheduled instruction or therapy as written annual IEP.

To date, all children in this district meeting criteria are determined to need special education, primarily remediation at the elementary level and transition services at the secondary level.

Position: Special Education Designee

All modifications and interventions are once again reviewed to determine if all possible resources and techniques available have been used in order to meet the individuals educational needs. If the M-team feels that all possible educational resources available have been provided and the student continues to perform below expected educational levels and continues to fail within the regular education setting, it would then be recommended that special education services be provided.

Position: School Nurse

After the collective reports are given in the M-team and it is determined that the child meets the criteria for learning disabilities then he/she automatically is placed in special education by the consensus of the group. Another IEP meeting is then scheduled to determine how that will specifically be carried out.

Position: University Teacher/Trainer

No answer.

Research Question 4:

What are your suggestions for improving Wisconsin LD eligibility criteria and identification procedures?

Position: Classroom Teacher

No suggestions. I feel the eligibility and identification procedures are working well.

I think the school psychologist should have to come and observe the child in the classroom and not just make the decision based on the tests that are given on a one-to-one basis.

Position: LD Teachers

I would suggest that LD services be available for first and second graders with out formal procedures of referral, Psych. evaluation and sp. ed. teacher's evaluations. This would of course be contingent on parental permission. During this time, if the classroom teacher or LD teacher feel a formal referral is needed, it would be made. Meanwhile, the students could benefit from the LD teacher's resource before the significant discrepancy builds to measurable data.

How or why was "significant discrepancy" decided to be 50%?
Discrepancies of 50% are difficult to determine "exactly" with informal tests and observations. I'm glad there is some room left for judgment calls where the scores are close.
P.151: On 3-b. What are the criteria for "extended absence" continuous inadequate instruction, etc. When is too much or how long?
On 3-c. Who rates motivation? How do you rate it?
What can we do about the "gray area" students that don't meet the qualifications, but we know it's just a matter of time before they do and that means they'll be even farther behind by the time we can place them. Re-evaluating them every year to see if they qualify (fit the formula) is not the answer.

1. Add to rules defining what it means to need special education.
2. Make the state criteria congruent to the federal criteria.

I feel that none is needed.

All team members seem well versed in all ramifications of the special education identification process and it seems to function well.

Expanding the criteria to allow more "gray" area students to be eligible for services. Some students who are truly learning disabled, in my opinion, do not fit the criteria, but will not and often do not survive in the high school system. They are too "low" to be successful, but not "low" enough to fit the criteria of the state.
Resources rooms designated to serve "at risk" or gray area students have proven to be inefficient (in my opinion) resource room teachers often see this "helping" period as another prep period and are not trained to do the specialized, individualized help that an LD teacher can provide. Often times students need help on tests, Resource room teachers have regular class loads the rest of the day. It is very frustrating to me to see kids failing and not getting help because the don't "fit" the pnoed [sic].

Get rid of that IQ mark. Even a child with a gray area 73-87 IQ can benefit from strategies in an LD classroom. Even if it is a place to go for help during study hall. A 504/ At risk sate the problem-but sometimes classroom modifications are not enough. Eligibility-yes, a delay but significant delay in older children might be a 2 year delay. Our formula is pretty restricting. In fact... What is wrong with learning lab type situation where you have or LD instructor, ED instruction, Reg. Ed. instruction and aide available all class hours a day for individualized instruction or help offered to any student reading it.

LD label should be discontinued because it is such a wide-range of unique learning problems or combination of learning problems that it should be called developmental learning delays, or if a child is struggling just give them assistance. I have seen cases where there has been a student that has had a lot of tutoring, parental support, teacher support and still struggles but is just above cut-off for LD. So he doesn't get the intervention. He has to fail more to get help. So we were doing him an injustice by helping so much, when he needed the expertise of an LD teacher.

A. The in-child deficit must be more thoroughly proven and documented on the M-team report. A child who has learning disabilities should be assumed to have a neurological impairment whether proven or not. A child with a proven academic impairment is not necessarily learning disabled.
B. Stronger documentation that the exclusionary factors listed in the criteria are not causing the academic discrepancy. Other states' criteria list more: e.g., frequent absences or moves.
C. Medical and social history should be required. This would aid in the consideration of the exclusionary factors.

Using percentiles and/or grade level scores for comparisons. Hard working LD kids may receive the least assistance. Much time is spent on the reluctant and low functioning students where the pay off is minimal.

Position: Diagnostic Teacher

Train LD teachers in the science and not art of assessment. In assessment, emphasize known achievement levels to a greater extent while de-emphasizing the questionable, hypothetical construct of information processing.

-Not 90 stringent.
-Able to move through "process" quicker.
-Don't take kids with a subtest IQ of 90- Keep the profile high.

I would like to see the average IQ criteria changed. If a child is functioning significantly below his expected achievement and is a gray area child, he should also be able to receive services. These children are just as needy if not more needy than the average IQ child. The children that do not quite have an average IQ but have significant difficulties learning to read must take the Grade 3 Reading and other state tests. This is truly unfair because a child that has just made the Average IQ criteria can be determined not to take this test based upon his/her disability in his IEP. It would also like to see the LD teacher be allowed to work with some students on a short term basis.

Position: Counselor

There needs to be a better way to determining whether a student's discrepancy is due to an actual disability or to some other variables, such as motivation, which is based on observation or opinion. It would seem a longitudinal analysis could be a requirement to document that there is an existing condition- not dependent on current environmental and/or personal problems.

Due to the growing numbers of LD students, it would seem the eligibility requirements need to be "toughened" up a bit. Perhaps the formula could be changed, or replaced.

Position: School Board Member

No answer

Position: Speech Therapist

Better "regular education" teacher education. Faster identification (above will help).

First, the criteria for RE- enrolling is excellent: LD doesn't go away. Kids need varying levels of intervention and it's important that they can be re-enrolled (otherwise LRE might not be the case; you wouldn't let them go with the concerned that kids couldn't be served at a later time. 2. (f) learning disabilities: "significant discrepancy in 2 or more reading areas. I believe it should be 1 or more if the area is reading or math because these skills are so critical for independence.

Need more Emphasis on PI-11 #3
1. In child deficit must be better documented.
2. Educators need to be reminded that LD is neurological based. EXCLUSIONARY FACTORS must be stronger. Such as a) physical cause-blind, deaf, ADHD, b) Cultural/ environmental, c) motivation should include why (frequent absences or moves?)
3. Medical and social history should be required.

Position: Principal

Do a better job of in-servicing regular staff professional of developmentally appropriate teaching strategies before we are so quick to label and place students in special programs- it's out of control in some places- whenever a child has a problem (and there are lots of kids with problems) too many people look for special ed. placement...rather than get people together to explore alternatives approaches.

No answer.

Wisconsin's LD eligibility criteria should require that educational staff complete pre-referral interventions prior to defining a student for a LD evaluation. These interventions should include both instructional and curriculum modifications and instructional interventions that have addressed improving the student's area of need(s). These pre-referral interventions would assist in deterring student's eligibility and need for special education.

Wisconsin's LD eligibility criteria should use another method to establish the level of significant discrepancy other than the current formula, IQ times years in school times .5. This formula oftentimes in the lower grades (2-4) is not appropriate means to determine a student's significant discrepancy level. The majority of time in these grades, the referred student's levels of current achievement are well above his/her significant level of discrepancy. The formula then delays student's entrance to special education until a latter time. The student then continues to fall further behind which compounds his or her academic failures, negatively affects his/her self esteem and does not provide him/her with early intervention services, which may allow him/her to remedial their areas of deficit and be dismissed from special education at an earlier date. One use a regression formula similar to the one the state of Minnesota uses. This formula takes into consideration the students IQ, current grade level and the reliability of the test to determine levels of discrepancies.

The Wisconsin LD criteria should also identify whether or not the student needs to have 1 or 2 areas of significant discrepancy to qualify for LD services.
Wisconsin LD eligibility criteria could be improved by establishing a requirement that the evaluation team use curriculum based assessment techniques to determine student's level of achievement. This would help in determining level of significant discrepancy and current level of achievement. It would also assist the team in making curriculum and in structured recommendations whether or not the student qualifications is in need of LD services.

The Wisconsin's LD eligibility criteria could also be improve by establishing reliable and valid evaluation methods of documenting that the student(s) learning disabilities are primarily attributable to a deficit within their learning system in both academic and non-academic areas.

No answer.

No answer.

It seems that more and more students are being identified as LD but who are more in need of remedial assistance than perhaps actually learning disabled. It may be necessary to make the definition some what more restrictive or revise our thinking as to what special education services are all about.

I believe we have a gray area. student with IQ's below 90. These students have needs that are beyond the regular classroom teachers abilities to handle with 26-27 students per classroom. The guidelines requiring 50% behind in 2 academic areas seems counter productive. Imagine a 6th grade student with a 2nd grade reading ability and not able to receive special help until they get so fare behind that becomes an impossible task. By the time the second area qualifies the student often is so far behind in reading it becomes a total blocked for all academic areas.

Somehow more flexibility in applying the criteria at an earlier time could help avoid possible problems later on. An example: At a recent M-team a Child (1st grade) was found to have significant problems with phonics. Title I help has been made available to her throughout this school year. The teacher and parent have worked closely with the child. The student met the criteria in one area; therefore she is not eligible for special ed. programming. Earlier intervention could have had a positive effect. The child may have more problems in the future.

The process and procedures presently are functional, but perhaps more flexibility could be allowed for the director of the program.

Position: School Psychologist

I'm concerned that students will suffer if LD becomes a wide open territory (my director has said the state may drop the average IQ requirement). I pity the teacher who will have a class full of kids with ability levels from 70 on up. Perhaps we need a new category for the gray area kids but I assume 504 will catch them. In that case, the state needs to reimburse our special ed. teachers because many times they are the only ones with the expertise for teaching these students. I would like to do away with the two areas for qualification. A 50% discrepancy in one academic area should be serious enough for special help.

Allow greater flexibility with "Gray" area children who display obvious characteristics of an sp. ed. student.

-Use more curriculum based measurements
-Discontinue criteria-openly enroll students who are struggling in the classroom. Button 2 to 50%
-No more labels.

The question seems to lie at the heart of our dilemma over LD. use of grade equivalencies seems statistically questionable at best. Possibly a table could be devised that somehow outlined what standard score on an achievement test based on what measured IQ is appropriate to consider a student eligible for LD.

I would like to see standard scores used in the determination of LD.

Allow the upper range serve of an IQ range to be used in determining the discrepancy if the formula continues to be used. IQ 85-95 range: 95(IQ) *
and allow the standard error of measurement to be used to support discrepancy when the psychologist knows there is an LD but the child misses the formula discrepancy by a few months. for example: 2.2 G.E range (1.8-2.6).
With the formula- there are children who are not really LD who meet eligibility and there are LD children who don't meet eligibility due to depressed negative scores, excessive tutoring in academic (private obtained by frustrated parents) which minimizes discrepancy, etc.

Never have I seen the psychologist judgment of normal/average learning potential accepted by our supervisor unless some IQ score supports it (not in the last 6 or 7 years). No matter how much is documented, explained. explored, etc. the IQ score # seems to be LAW in the formula rather than the professional judgment of the psychologist as to whether there is potential for average/normal learning.

I feel the formula now (in my district) is being used as a gatekeeper to keep children out of LD programs, and that was never the intent of the formula in its earlier years as stated in a DPI document in 79 or 80. I remember reading it but can't find it.
Perhaps the formula should be omitted and normal intelligence and potential for normal/Ave.. learning be a judgment of the psychologist and team. Discrepancy can be determine by expected achievement for a normal/avg. score. For example: 100(IQ) years .5 unless the IQ supports higher than average/normal ability and then the exact score should be used.

If a child qualified, I think they should or tried in regular education with appropriate aides and materials, being placed in resource. I don't think we have very good system in place to include students.

No answer.

Our district uses an LD criteria check list, when the LD evaluator uses to make sure that all of the eligibility areas are considered. Although this is another level of paperwork, it documents that all of the factors, including exclusionary conditions, are being considered. Provide more clarification on LD identification of students with less than two years of school. The guidelines are not clear, especially for students who have been retained.

1. Allow identification of LD without having to show 2 areas of deficit (not including the math alone identification already allowed)- example: isolated severe deficit with written language.
2. Allow identification of LD based on significant discrepancy between IQ and standard scores on academics, without regard. For example, a standard score of 70 on reading vs. an IQ score of 100 indicates a severe discrepancy, on it's own, assuming the current exclusionary factors remain.

I think you are looking in the wrong area to solve the problem which you are attempting to address. My understanding is that some feel excessive numbers are being placed in special ed. LD. The solution to the problem is to develop appropriate programming in Reg. ed. which can address the learning problems of the students that would mealy making the criteria more stringent will not have a positive impact for the students or the teaching staff.

The "within child" criterion is difficult if not impossible to determine. I feel that much guess work goes into this determination or that this criterion is virtually ignored. (Hard to "prove", hard to "disapprove".) The 50% formula strongly encourages the use of normative test instruments, hence the high reliance on this type of assessment in the determination of eligibility. While normative tests may adequately address the issue of discrepancy, they do not do a good job providing instructionally relevant information. We need to be encourage to learn and apply functional assessment techniques. For example, let's encourage the use of Curriculum Based Measurement in the determination of eligibility as well as in the determination of the effectiveness of our interventions. Whole districts can be normed using CBM and have been. Take a look at Minneapolis and Pine county in Minnesota. Take a look at Iowa's reform movement (now in its sixth year of implementation) and see if we can learn something about non-categorical identification and funding. Let's also take look at their attempt to provide regular educators with a format for more effectively addressing the needs of children with mild academic and behavioral problems through the development and support of building assistance teams (to be distinguished from pupil services teams). other states are in the process of reform as well. I believe that by addressing these broader reform issues, we will at some level address the LD eligibility criteria to which you refer in your cover letter. (so much for the LOOSE CANNON response!)

Other issues: Math should stand alone, period: A significant discrepancy is a significant discrepancy and should not be tied to an IQ of 90.

ODDS and ENDS: Strong building assistance teams would help to address the question of the need for special education services by thoroughly documenting interventions and their effectiveness prior to referral; While the our DPI does not overtly discourage functional assessment (I rather think that they would encourage it), eligibility criteria does. For the assessment team to simultaneously engage in normative and functional assessment is "time intensive". In any case, functional assessment would also help to address the need for special services.

INTERESTING QUOTE: "... the processes necessary to determine program eligibility and those necessary to implement effective interventions are different. Each serves its own purpose well. ... problems arise, however, when one method is used to achieve the goals of the other" (Batsche and Knoff, 1995, Best Practices III, Page 573).

I think the state needs to revisit the exclusionary factors (e.g., poverty, cultural influences etc.). In a district with a high minority population, high poverty, high neglect and abuse etc. these factors can and do prevent these students from getting assistance. Special education could be the key to the success of these children.

We have a tendency in education to create environments which foster the creation of learning disabled children, so it would help if we were more in tune with that which is appropriate developmentally, supportive, and that which is based on the literature in the area of need such as reading recovery. That being said, it would be helpful if services could be offered when children need them as opposed to having a formula which tends to delay service to the point in time where it is exceedingly murky diagnostically to sort through the variables which indicate an in child deficit.

It might be helpful if the LD identification criteria were heavily front-end loaded and related to growth and development prognostications, with under achievement assumed to be the result of cultural, social, and instructional factors, unless specifically shown to be otherwise. Sadly, our current state model has lead to an achievement model understanding of learning disabilities, with teachers in training focusing on the formula for eligibility rather than in child deficits. Instruction at the middle and high school levels focus upon academic hurdle jumping to survive school rather than focusing on learning strengths and strategies for managing ones learning ecologically.

Personally, I think the criteria is very clear-cut and understandable. If we open it up to include gray area students we will see a "huge" increase in our LD population. I believe the answer is more reg. Ed. modifications and programs for AT-Risk students.

I am professionally troubled by the categorical identification of the 3 to 6 year old. This is such a plastic time for young children and significant change can occur over a relatively short period of time. I would like to see this population provided service based on symptoms rather than be driver to a categorical label. I realize there would need to be some criteria for service, but requiring of a label LD at age 3-0 does not seem to serve the child.

I'm not sure that using any formula makes ability/achievement discrepancies as part of the LD determination is necessary or desirable. I think it would be simpler just to provide remediation to students with the lowest academic skills. This would be consistent with longitudinal studies like Shayirlz et al. finding reading LD students to be at the lower end of a normal distribution of reading abilities, not a distinct population.

1. Get rid of grade equivalent and use standard score discrepancy.
2. Clarify LD criteria for those with less than two years of school.
3. Eliminate spelling as independent area of LD.
4. Allow reading alone as area of qualification for LD.
5. Be more precise about reevaluation criteria- for example: what if IQ score drops 20 points on identical instrument over the course of 3-6 years?

Position: Special Education Designee

I feel the present eligibility criteria used to help identify a handicapping conditions in the area of learning disabilities is working fine. DPI may want to look at eligibility criteria in regard to Native Americans. While working in the field get the impression that many Native Americans feel that tests used to evaluate their people are not normed to address their culture and abilities. Do not totally agree with their ideas but can see why they are concerned.

Position: School Nurse

It doesn't seem to be a problem for us except that it is very time consuming and sometimes parents do not show up for the meetings.

Position: University Teacher Trainer

Require the "ruling out" of poor instruction. e.g. TIES, observation, etc.
Most students I see are not LD, but they qualify solely because of their instructional history or current instructional practices. Put in- Must show evidence of systematic instructional practices. Too much time is spent on finding "process" deficits in order to qualify kids.

Responses of M-team members from non-randomly selected school district to Research Questions 2 and 4

Research Question 2:

If a student meets the criteria for learning disabilities, how is it determined whether the child needs special education?

Position: Classroom Teacher

> That is how it's determined. The child must meet the criteria for learning disabilities. If he meets it he goes in. If he doesn't meet it he doesn't get the special classes. There is a meeting of all the teachers who have this child in class and all the people who tested the child and the parents. The teachers present their recommendations and the parents can accept or not.
>
> If the child qualifies then he/she automatically receives sp. ed. help in those qualifying areas. An IEP is written and assistance is given either within the regular classroom and/or as partial "pull-out".
>
> Students, after testing and communication with present and past teachers, enter the LD program as soon as the M-team meets, parents receive and discuss the evaluation and they sign and turn in the necessary paperwork. As long as there is a place the process is swift. Otherwise some shifting is needed-which is completed as soon as possible.

Position: LD Teacher

> Least restrictive environment is considered, the best times/places/settings for the child are looked at, and the placement is offered. If a child meets the criteria for LD, it's very rare for the child not to receive services of some kind.
>
> If the student can not function in the regular setting without modifications of curriculum or grading the student is offered placement. They are also offered placement in an LD program when their deficits are so severe that instruction is required in alternate manner than the regular classroom can offer.
>
> If the criteria are met, an IEP committee writes an IEP and placement is offered based on IEP goals and objectives.

Position: Diagnostic Teacher

> This is almost automatic. When referral is made the student is failing. We do not have many resource for individual attention. So accessing special ed. is the best way to help

this child to succeed. The exception to this rule is the transition time from elementary to junior high. When pull out may not help now, but setting up a program for the following year is necessary.

Position: Speech Therapist

If he meets the criteria he receives services-direct or in classroom, whatever meets needs and is least restrictive.

My experience with the M-team in deciding whether a student is enrolled in LD if they meet the LD criteria has been to look at any "in child deficits" that may effect acquisition of learning. These deficits are usually visual or auditory but sometimes both. We look at a students' attendance patterns, both short term and long term at times we feel the lack of academic functioning or lag is due to poor attending behavior, thus do not recommend enrollment.

Position: Principal

We apply state/district criteria. 50% delayed in 2 or more areas.

The M-team process is used for the determination.

Position: School Psychologist

We examine his/her: classroom performance, self-esteem, parental wishes, and make comparisons with same grade peers within the school setting. The extent to which accommodations are necessary is also examined. if the student needs an alternate curriculum or specialized instruction to be successful then EEN placement occurs.

The general rule we use in whether the child is progressing adequately in the classroom or in regular ed. remedial programming. If the student is not, we recommend sp. ed. criteria would include grades, peer relations, self concept, etc.

M-team is reviewed by Spec. Ed. director, the director signs off on it and then an IEP is developed.

Student must be achieving at 1/2 expected grade level in the two areas of spelling, written language or reading or in the single area of math. Special consideration is given in case where a language disability or attention deficit depress cognitive scores and classroom functioning. The practical need for exclusive modification within the classroom impacts on the decision as to whether the child needs special education.

The "infamous" Bond-Tinker formula: IQ   Yrs in school   .5.

At the secondary level, if the student is failing, or near failing, several academic classes special education probably will be recommended, particularly if Reg. Ed. support (tutoring, modified testing, etc.) was not effective. At the elementary level, if Regular education support (tutoring, Title I, grouping) was tried with little success the child will probably be found EEN.

We look to see what regular ed. modifications have been made (adjust schedules, modify tests, modify testing procedures, curriculum materials, etc.), and how effective they have been. We also look to see what other Regular ed. options are available for student to use (teacher time, tutorial, monitoring, home-school communication, etc.). Does the student use the resources? Another area looked at is grades-Is student successful in the reg. setting?

In most cases the child is referred because he/she is not achieving successfully in at least one area. So if the child is found to meet criteria for LD we lovle at whether its possible for him/her to succeed in the daling curriculum, whether reuseable modifications(more than already tried) might work or whether direct LD services-use inded(inclusionary, pull out or combination). From a practical perspective- we've already tried other alternatives (i.e. Chapter I, tutoring, etc.) classroom mod. etc..... so that if the child qualifies for LD services at the MDT-deciding on whether the child needs special ed. is more a matter of when, how, and how much. From a practical perspective, I like to ask you. If a child is achieving at 1/2 of their expected grade level in basic skills how reasonable are classroom adaptations, if we really take that child's education seriously? Are "classroom adaptations" designed to better instruct the child? or allow the child to perform at the lower level of mastery? I would argue that special ed. is primarily attempting to better instruct the child and as we have increasing percentages of kids entering school from dysfunctional circumstances (personal/physical and or environmental) and more kids with less of what we used to call parental support, we must choose whether to lower the standards for the class or increase the special ed. services. Tinkering with the formula is rearranging deck chairs on the Titanic!

If the student meets criteria at the M-team the report is signed and agree is checked. The term is then turned in with our reports and the school EXED supervisers decides what type of program student needs. If the student meets criteria, the student gets EXED services.

Research Question 4:

What are your suggestions for improving Wisconsin LD eligibility criteria and identification procedures?

Position: Classroom Teacher

More personnel (Fat chance).

I think that how a child is functioning in a regular classroom should have more importance. If testing shows at least on area of qualification (not counting spelling) and low classroom performance then he/she should be considered for special ed. help. The way it is now, we have to wait for a huge failure, being 50% delayed. We've lost time that might help that child make progress instead of falling behind. I guess it looks like I wish we'd go to part of the actual criteria. Right now it's very hard to "make a case" when we don't have those 2 areas of 50% delay. in my district spelling doesn't count as one of those 2 areas. So here we have to have reading and written language, or math alone. If they need help in spelling they get it if they also qualify in reading and written language or math.

I feel the [Name Deleted] Schools do a very good job in identification and making services available to "true" LD students. The criteria gets gray however there students that are low average i.e.. 90's IQ that are in the same LD class as average 100's IQ and higher. The progress of these students with Average and Above IQ's is not as it should (could) be. Slow functioning students hold back and often frustrate the Average LD student. The LD program is becoming a program for students "falling through the cracks" of our educational system.

Position: LD Teacher

The current eligibility criteria is very accurate in the area of separating the truly LD student from other students. The problem arise when students who struggle do not qualify because of low ability. They cannot get services because they are not truly LD, but schools do not always know what to do with these students. The M-team procedure allows M-teams to make determinations based on their collective judgment regarding students who approach, but do not meet, eligibility criteria. (part V. of WI criteria) the final decision belongs to the M-team, exactly where it should be.

Section VII is very unclear- at what point does enough documentation exist? By the time they reach referral and are assessed hopefully documentation exists that substantiate deficits within a child's learning system. Section VI is equally as vague- in my opinion the language needs to be more clear. I was a diagnostician in Wyoming prior to my taking an LD/ED job in Wisconsin-in general I feel that Wisconsin's state guidelines are very vague. It has also been my experience that use of standard score comparisons to determine eligibility were more effective/accurate than grade scores. Grade scores are in my opinion, for current reflective of what is expected for current grade functioning. There are too many discrepancies between schools and school districts on what concepts are taught in curriculum.

I have a concern regarding the discrepancy between Wisconsin criteria and federal criteria.

Position: Diagnostic Teacher

I believe the orient-procedures [sic] are adequate for most cases. Difficulties arise with the exclusionary statements. How can we measure or consider changes in school, days absent, dysfunctional families, ESL (Hmong in particular) etc. in more objective terms?

Position: Speech Therapist

The formula works but there is the 80-90 IQ group who don't receive services. There should be some way to meet needs of these students. When they don't qualify parents feel like their child is abounded and truly these kid have a rough time in school. Maybe smaller classes and teacher training would help these students because they aren't truly LD -just severe students.

I see many students who demonstrate in child deficits, have good attendance, put forth good effort but still struggle. They may meet the criteria for LD with their academic functioning but do not with intellectual functioning. Can't someone with a 75 IQ have a learning disability. I certainly think so but these students are left to sink or swim in regular ed. because they do not meet both portions of the state criteria. I suggest that you change the formula by using the child's intellectual level as a starting point. Then use the academic functioning from that intellectual functioning and see if that significant discrepancy still exists. If it does and they exhibit in child deficits, they should qualify for the program.

Position: Principal

They appear to generally be working in my district. The need for flexibility exists if it isn't abused.

1. There are problems with the Bond-Tinker discrepancy formula.
A. In order to qualify a student, the student has already experienced a huge amount of failure. They come into LD program believing they can not read, spell, do math, etc.
B. A student who has been previously retained or in a transition program is penalized because you have to add another year of school into the formula. A student who waits a year to enter kindergarten could qualify at third grade while a student the same age who was in kindergarten and transition might not. This is discriminate.
2. Suggestions to counter these problems with the formula.
A. Allow for more informal assessments and teacher discretion to document the learning disability. identification of atypical spelling patterns, in reading, slower processing speed, lack of rapid naming speed, lack of phonemic awareness, poor retrieval of learned information, etc., should be in the documentation.
B. Provide more extensive training on how to identify LD students, in LD teacher training programs.
C. if more effective testing is available for LD teachers, provide research. Are the learning Efficiency Test, Dyslexia Determination Test, etc., helpful measures?

3. Change the IQ requirements. Again, look more closely at the difficulties processing information (especially on the symbolic level). This processing difficulty is apparent across all ability levels. In reality, the decision becomes that of determining what is the primary handicapping condition. Students should not be excluded because of average or low average IQ.
4. Continue to look at exclusionary factors and stick to the academic and ;language areas. LD should not become the dumping Ground for every child who has ADD, every child who doesn't organize, every child who doesn't turn in assignments, etc.

Position: School Psychologist

I believe that the LD formula should not be used, as grade scores are not a psychometically sound measure. In addition, I question whether a student needs to be discrepant in 2 or more areas. I feel a closer examination of the federal definition is warranted.

The Bond-Tinker formula is archaic at best. We need a statistically based model using standard scores not grade equivalents. Deficits should be statistically significant at a prescribed level. The criteria for kindergartners and 1st graders with less than 2 full years of schooling is even more ridiculous. It uses age score with no regard to the child's ability or age reality to grade placement. Age based standard scores at a certain statistical level of significant would be much better.

Keep the schools aware of the need to follow the criteria. Keep the LD/EEN teachers and school psychologists informed of current changes in the educational laws. Start informing regular education teachers about special education needs and get more information out to the public. Make sure the criteria is kept objective not subjective.

I think the eligibility criteria is fine the way it is.

While Bond-Tinker is a good or bad as any of the other discrepancy formulas, what's really abused is using "grade equivalents" which must fall below the discrepancy level as calculated from Bond-Tinker. Grade equivalents are crude, mathematical- no, imaginary or contrived statistics which have little or no validity. What about using "within group" studies the standard scores, percentile, etc. Psselgdythe suggested something like this in the NASP communique several years ago. To have LD placement or Eligibility on something as "mythical" as grade equivalents is disservice to every one particularly kids and their families.

Eliminate the 90 IQ cut-off as a rigid criteria as it is in many LD teachers' minds. It might be helpful to have guidelines for determining "functional skill levels". Formal achievement tests are not always indicators of how the child is learning within the local educational environment.

The LD process is pretty decent. The problem seems more to be what resources are available (materials and staff) to "appropriately" meet the students needs. Here is where the Rubber Hits the Road! I also believe that parent desire for a "label" pressure is there, especially at the secondary level. I think control factors of meeting eligibility needs to remain with school. I have experienced many parents who shop private agencies and physicians until they get one to say the student has a LD. In the process of the state and federal govt. A much better job of in servicing professionals and through university training programs about criteria needs to be emphasized. An example: I have some students from a school psych program from a University of Wisconsin system doing their practicums. They have not even been trained, familiar with or ever seen copies of CH 115 or 94-142. So, better training of our professions to include doctors, educators, psychiatrists, psychologists, psycho therapists, social workers, etc.

Eliminate the formula- it's nonsense. Children should not be considered to qualify or not qualify for special ed. All kids in public school qualify for special ed. services. However only a few really need these services, which should be provided based upon need. For example: if a kid needs help in reading (reading below range of class instruction) services should be available based upon degree and type of need. Make a seamless variety of services available for students who function one or more standard deviation below the mean in ability and or achievement skills. The type or degree of servicing should depend upon the need as established at the MDT meeting, and the subsequent IEP-which may or may not involve special education. Special education money could be allocated based upon percentage of the total population, with some adjustment for poverty and local circumstances (as per local petition/request/grant). I think we'd be better off cashing the labels (LD, CD, ED, etc.) and serving the need with reasonable lelytary [sic] restrictions.

I really think we need a program that does not use IQ. The program needs to be based more on processing in-child deficits. There are too many gray area recieving no services.

Appendix S

Notification of Follow-up Telephone Conferences

March 1, 1996

Dear Special Education Directors and Administrators:

This is to inform you that we are now entering the second phase of data collection for the study of LD identification procedures in the state of Wisconsin. As you are aware, this study is being conducted in response to concerns by the United States Office of Special Education (OSEP) regarding possible discrepancies between federal and state LD eligibility criteria. We wish to thank you for your cooperation in the first phase of our research and to request your continued cooperation, as we move into the second phase of our work.

The original agreement between DPI and OSEP included requirements that we conduct follow-up telephone conferences with parents, teachers, and administrators. The DPI and OSEP have agreed the researchers must be able to assure the confidentiality of these follow-up interviews. Therefore, we will not be able to share names of those from within your school district who may be called, the precise purpose of the calls, or the questions we'll ask. We can tell you that most questions will be presented in the form of a Likert scale, to which interviewees will be asked to respond within a range from strongly agree to strongly disagree. Responses from interviewees will be analyzed in relationship to the larger groups of school districts and staff members which compose the field for this study. At no point will any individuals name or the name of the school district be revealed by the researchers.

In addition to Likert scale questions, more open-ended questions will be asked of some groups regarding program options available. The same protections of confidentiality will be applied to these more open-ended questions. We will begin to make telephone calls early in the week of March 4, 1996, and we expect to continue to make calls until approximately March 15, 1996.

If you have concerns, we will be happy to discuss them with you; or, if you prefer, you may call Paul Halverson, at DPI, who will attest to the need for confidentiality in this process.

Thank you for your understanding and your continued cooperation.

Sincerely,

Harold Thorpe and Bert Chiang
LDEC Research Project

Appendix T

Regular Education Teacher Follow-up Telephone Questionnaire

Follow-up Telephone Calls: Regular Education Teachers

Name of person called   Position   District   Telephone #   Code#

About how many M-teams do you attend each year?______________________

Indicate one group----- Minority report--Random sample--Low referral Rate--Multiple Complaint

Caller (Signature)   Date & Time of call   Follow-up Call Needed: Yes No
If Yes, Dates & Time__________________

Respond to the following questions according to your personal experience. You should write down the following code
Directions: 1=Strongly Agree 2=Agree 3=Disagree 4=Strongly Disagree

1. Appropriate numbers of students are being identified as eligible for LD. 1 2 3 4
   1a. If the response is 3 or 4, request elaboration.
2. Classroom performance is given appropriate consideration when M-teams are determining student achievement. 1 2 3 4
   2a. If the response is 3 or 4, request elaboration.
3. Standardized achievement test results generally agree with teachers' judgments of student ability. 1 2 3 4
   3a. If the response is 3 or 4, request elaboration.
4. M-teams consider a variety of information when making determination about a student's intelligence. 1 2 3 4
   4a. If the response is 3 or 4, request elaboration.
5. Regular education teachers consider IQ scores when making referrals. 1 2 3 4
   5a. If the response is 1, 2, 3, or 4, request elaboration.
6. M-team members usually understand criteria that are commonly discussed at the M-team meetings. 1 2 3 4
   6a. If the response is 3 or 4, request elaboration.
7. M-teams take the regular education program modification already made into consideration when determining eligibility. 1 2 3 4
   7a. If the response is 3 or 4, request elaboration.
8. M-teams take into consideration the further modifications it is still reasonable for classroom teachers to make, when deciding if a child needs LD services 1 2 3 4
9. Regular education teachers feel like equal participants at M-team meetings. 1 2 3 4
   9a. If the response is 3 or 4, request elaboration.

Form for Parent Contacts

Person Called: Telephone Number: Date:

Caller: Case Number: Time:

1) Regarding Caller
2) Regarding Status of Child's records
3) Regarding inclusion in report

Information Requested:

1) Current status of child

2) Events since records were developed

Suggestions for Changes/Improvements:

1)

2)

3)

4)

5)

6)

Appendix U

School Psychologist Interview Guide

A semi-structured interview guide for this pilot study of selected school psychologists

1. The first four questions have to do with determining significant discrepancy for LD eligibility. On a 4-point scale, (1 strongly disagree, 4 strongly agree), indicate your position for each statement.

a. the significant discrepancy model should be completely eliminated 1 2 3 4

b. the use of a formula for determining significant discrepancy should be eliminated 1 2 3 4

c. one area of significant discrepancy should qualify a child for LD services 1 2 3 4

d. no change is needed to the existing Wisconsin rule 1 2 3 4

The next few questions are specifically related to the Bond-Tinker formula currently used in Wisconsin for determining LD eligibility:

2. On a 4-point scale, 1 being least useful and 4 most useful, how useful do you think Bond-Tinker is?

1 2 3 4

IF 1 OR 2 , GO TO 2a and 2b, OTHERWISE GO TO QUESTION 3

2a. Why is Bond-Tinker not useful?

____

____

____

2b. Suggest an alternative method to replace Bond-Tinker.

____

____

____

3. Is Bond-Tinker equally useful for students at elementary and secondary level?

____ Yes ____ No

If no, at which level is it more useful?

________ elementary ______ secondary

4. Is Bond-Tinker appropriate for students who have repeated grades?

____ Yes ____ No

(Either Yes or No) Why so ?

5. Is Bond-Tinker appropriate for students with IQ scores between 80 and 90?

____ Yes ____ No

6. When Bond-Tinker is used by M-teams, in your experience, which of the following is the case?

a. It is used precisely (i.e. a cutoff is established and applied)

b. It is used as a reference only (i.e. a great deal of flexibility is allowed)

The last few questions are related to IQ scores:

7. Do you think IQ should be considered as a factor while determining LD eligibility?

____ Yes ____ No

(Either Yes or No) Why so ?

8. On a 4-point scale, 1 being least likely, 4 most likely, how likely is a student to be referred for LD if it is already known that his/her IQ is below 80?

1 2 3 4

9. On a 4-point scale, 1 being least likely, 4 most likely, how likely is a student to be referred for LD if it is already known that his/her IQ is between 80 and 90?

1 2 3 4

Thank you very much for your time and cooperation.